UNDERSTANDING

WOMEN BEHAVIOUR

Edited by
Amrita Yadava
Sushma Sharma
Nov Rattan Sharma

SHOUT
SHARE
IT

The significant contributions of prominent women in several walks of life have awakened the dormant interest in theories and concepts relating to women behaviour. Thereby researchers have started to spotlight the women issues from different angles. Present volume is a concentrated effort in this direction. It is the compilation of twenty seven articles contributed by well known social-scientists. The book has been classified into five sections. First section, consisting of six articles traces identity and worth of a women. Second section includes five articles relating to development and behaviours. Third section has also five articles where stress and its copying alongwith effects have been highlighted. There are five chapters in section four too. This section deals with the results of double burden on women's behaviour. Last section of the book presents major socio-political behaviour patterns of women.

Editors are of the view that inputs given in the book will not only generate genuine understanding of women behaviour among readers but will also help in creating harmony and congeniality in the society by checking ills against women.

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Preface

Gender is a significant variable not only in social science researches but also in philosophy and literature. It is a global scenario to note that women have been considered as 2nd rate citizen throughout. This discrimination and maltreatment has brought about many behavioural changes in this 50% of the population. It seems true only in the sayings that 'ladies first or better half' but in reality truth is much more bitter, they are considered neither first nor better. So, there is a strong need of understanding the women behaviours so that intervention strategies for their upliftment may be developed to rectify the ill-effects on their behaviour caused mainly due to discrimination. However, it is also true that some researches seek explanation regarding gender based behavioural variations in biology, at the same time some devote this to history and others to even evolution process. Although, fact remains that understanding of women behaviours is essential for every civil citizen including women themselves.

Behaviour, being the central part of the self, is more directly the subject matter for a psychologist. Editors, who happen to be student of psychology have sought help from the learned thinkers and researchers to enable them and the other common readers to understand the various components of behaviour in special relation to female gender. Editors are of strong belief that without proper and adequate understanding of the women behaviour, all policies, privileges, laws and women commission recommendations can not be fully exploited. It is further added that untill sincere efforts

are made to understand female psyche much can not be achieved. With this objective in mind, editors compiled this book where various component of female behaviour have been described in five sections. There are in total twenty seven chapters spread over in these sections.

Editors owe special thanks to all the contributors of this volume. It was their full co-operation and time-bound preparation of scripts which made the job of the editors quite simple. However, editors do not take any responsibility for the views as well as findings incorporated in the articles which thereby rests with the contributors. Readers are welcome to send their comments and suggestions directly to the authors, although, editors take moral responsibility for errors and omissions.

Editors shall be failing in their duty, if they do not express sincere thanks to their colleagues, friends and family members. Dr N.K. Singh M/s. Global Vision Publishing House, New Delhi deserve to be complemented for his creative suggestions and qualitative production of the book.

Editors are hopeful that this book will not only help in understanding the behaviours of women at large but also provide momentum to the movements working for the upliftment and welfare of the suppressed as well as depressed lot.

Editors

List of Contributors

A.M. Khan, Professor and Head, Department of Social Sciences, National Institute of Health and Family Welfare, New Delhi.

Adarsh Kohli, Additional Professor of Clinical Psychology, Department of Psychiatry, PGIMER, Chandigarh (UT).

Amrita Yadava, Professor, Department of Psychology, M.D. University, Rohtak (Haryana).

Anita Shrivastava, Assistant Professor and Head, Department of Psychology, Eritrea Institute of Technology, Mai-Nefhi, Eritrea, N.E. Africa.

Anuradha Bhandari, Professor, Department of Psychology, Panjab University, Chandigarh (UT).

Aradhana Shukla, Professor and Head, Department of Psychology, Kumaun University Campus, Almora (Uttaranchal).

Archana Shukla, Professor, Department of Psychology, Lucknow University, Lucknow (UP).

Arti, Research Scholar, Department of Psychology, M.D. University, Rohtak (Haryana).

Dhanalakshmi D., Teacher Research Fellow, Department of Psychology, University of Madras, Chennai (TN).

Haseen Taj, Reader, P.G. Department of Education, Bangalore University, Bangalore (Karnataka).

Karobi Das, Lecturer of Clinical Psychology, National Institute of Nursing Education, PGIMER, Chandigarh (UT).

Madhu Anand, Lecturer, Department of Psychology, M.D. University, Rohtak (Haryana).

Madhu Nagla, Reader, Department of Sociology, M.D. University, Rohtak (Haryana).

Mahesh Bhargava, Chairman, Harprasad Institute of Behavioural Studies, 42, Hardeep Enclave, Sikandara, Agra (UP).

N. Sumila Devi, Department of Psychology, Jamia Millia Islamia, New Delhi.

Nov Rattan Sharma, Professor, Department of Psychology, M.D. University, Rohtak (Haryana).

P.C. Mishra, Professor, Department of Psychology, Lucknow University, Lucknow (UP).

Promila Batra, Professor, Department of Psychology, M.D. University, Rohtak (Haryana).

R.K. Prabhakar, Formerly Head, Department of Public Administration, M.D. University, Rohtak (Haryana).

Rajesh Kumar, Lecturer, Department of Psychology, Govt. College, Jind (Haryana).

Ramesh Verma, Assistant Professor, Department of Community Medicine, Pt. B.D.S. P.G.I.M.S., Rohtak (Haryana).

Ranjana Mittra, Department of Psychology, Mahila Mahavidyalay, Banaras Hindu University, Varanasi (UP).

Richa Shri, Senior Lecturer, Department of Pharmaceutical Sciences and Drug Research, Punjabi University, Patiala (Punjab).

S.C. Arora, Professor, Department of Public Administration, M.D. University, Rohtak (Haryana).

S.K. Srivastava, Professor and Head, Department of Psychology, Gurukul Kangri University, Haridwar (Uttranchal).

Sandhya, Lecturer, Department of Social Work, Kurukshetra University Kurukshetra (Haryana).

Santosh Nandal, Reader, Department of Economics, M.D. University, Rohtak (Haryana).

Sarika Choudhary, Head, Department of Economics, Dayal Singh College, Karnal (Haryana).

Semhar Mihreteab, National Service, School Counsellor, Eritrea, N.E. Africa.

Shabnam Priyadarshini, Associate Professor, Centre for Management Training and Research, Kharar (Punjab).

Shalini Singh, Lecturer, Department of Psychology, M. D. University, Rohtak (Haryana).

Shruti Bhalla, Department of Psychology, Kanya Maha Vidyalaya, Jalandhar (Punjab).

Sonu Joshi, Research Scholar, Department of Psychology, M.D. University, Rohtak (Haryana).

Sunita Dwivedi, Reader, Department of Psychology, Navyug P.G. College, Lucknow (UP).

Sunita Rani, Research Scholar, Department of Psychology, M. D. University, Rohtak (Haryana).

Surendra Kumar, Reader, Department of Sanskrit, M. D. University, Rohtak (Haryana).

Sushma Sharma, Lecturer, Department of Psychology, Sat Jinda Kalayana College, Kalanaur, Rohtak (Haryana).

Swarnlata, Department of Psychology, Lucknow University, Lucknow (UP).

V.D. Swaminathan, Professor, Department of Psychology, University of Madras, Chepauk Campus, Chennai (TN).

Vandana Sharma, Professor, Department of Psychology, Punjabi University, Patiala (Punjab).

Veena Katyal, Research Scholar, Department of Psychology, MJP Rohilkhand University, Bareilly (UP).

Vidhu Mohan, Formerly Professor of Psychology, Punjab University, Chandigarh. R/o. 587-D, Sector-21, Panchkula (Haryana).

Vidhu Mohan, Lecturer, Department of Psychology, Kanya Maha Vidyalaya, Jalandhar (Punjab).

Waheeda Khan, Reader, Department of Psychology, Jamia Millia Islamia, New Delhi.

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Introduction

Amrita Yadava, Sushma Sharma and Nov Rattan Sharma

Behaviour is the index of human character. A person is known by his behaviour. In order to understand the individual one must try to understand his/her behaviour. However, there are lot many determinant of behaviour as it is not as free as it seems to be. There may be many extrinsic and intrinsic factors which not only create behaviour but also help in its expression. It is because of this that behaviour is always considered to be goal oriented, although, goal may be sometimes even unknown to the person. There are many approaches in psychology which try to present description of behaviour as per their own perspectives, although, every approach finds importance of behaviour. Therefore, it is significant to understand the behaviour patterns.

Ample research evidences indicate that there are individual differences in respect to behavioural indices among people, even though, there may be some group similarities as well. Gender is an important variable which may see group similarities and dissimilarities of behaviour patterns. Since the civilisation male and female are known by their particular behaviour characteristics, but keeping the fast mixing groups in mind it was hypothesised that there may be overlapping behaviour patterns. Although, this hypothesis seems to be untrue because of strong and deep rooted male dominance in the societies. This is a global picture, true for every where, seen almost in all developed or developing countries

and applicable to each and one to all societies, cultures as well as communities. Male dominance and their ruling for centuries together has brought out indelible impacts on the behavioural properties of women folk. This, you may call discrimination or injustice to this half population of the world. Authors are very sorry to remind that even in U.S.A. voting right to female was granted much more many years after their counter parts, at the same time authors are delighted to share with the readers that in India voting right to male and female was granted by the Indian constitution simultaneously. However, granting voting right does not solve the problem, rather condition of women particularly in India is much more pitiable, deplorable and pinching. Whatever is being said or written over here may not be true about all women or women every where or about all the times but it definitely concerns every one of every where at all the times.

. Unnecessary tussle is being crafted between men and women by the so called reformers in the name of empowerment. Authors are of the view that these selected men as well as women are not serious lot to resolve the empowerment crisis. If you look for its dictionary meaning it implies to give power or authority. And the ideology behind empowerment is for human existence and development with root in social actions. Empowerment is associated with community interests to serve the objective of increasing the power and influence of oppressed groups to enhance participation of all citizens in National building. If concept of empowerment is looked from a point of women empowerment it implies to give power/authority to women. There may be two basic question at this stage:

(*i*) Is it transfer of power from Men to Women?

(*ii*) Is it redelegation of power from Men to Women?

Probably not. In authors' view it is not:

- striping of men's power or any body else power;
- shifting of power from men to women;

- clash of power between two genders;
- a threat to man's power;
- rivalry between man and woman for power; or
- putting some one on somebody's head.

Rather objective of women empowerment is making efforts to bridge the gap between the speed of two (men and women) so that one is not head of other and they walk, talk, work, think or act together in one direction to achieve optional productivity. It is essential to work consistently in this direction because will you disagree that:

- Every citizen has equal legal rights;
- Woman is an integral part of society;
- Woman is originator, progenerator and rejuvenator i.e. home maker;
- Woman play significant role in deciding destinaly of a child, society and nation too.

Importance of the women issues are pretty clear for declaration of year 2001 as the year of women empowerment. Moreso, many constitutional articles (14 and 15) amendments (74th) and many announcements on the part of stale/central governments have been made to uplift the women cause. Recent PNDT act and act for domestic violence against women are also the some more steps in this direction.

Unfortunately, these legal steps, proclamation of acts & amendments and reformatory declaration have not yielded desirable results. The condition of an Indian woman is still deplorable and result of the measures taken so far are far from satisfactory. Women is still economically, socially, politically, educationally, culturally and even psychologically backward. Authors are failing to understand that why a woman has not been given their due status, although:

- she is a better half;
- she is a significant half of human race; and
- highest objects of worship in India are in the feminine form.

Authors seek permission to be more bold in admitting that census 2001 presents a dismal, pitiable and even most alarming condition that number of women to men is decreasing in most of the parts of India, Attitudes, misconceptions and stereotypes about the girl child increased the gravity of this gender ratio problem. Needless to say, desire to have a male child had made the parent to forget that even to deliver him one needs her.

Keeping this discrimination at fetal, natal and post natal stage, empowering the women is meaningless. Therefore, the agenda for women empowerment logically should begin with girl child instead of her mother. Moreso, the so called feminists in India need to insist and propagate on reservation of seats for women in the womb at first and then in parliament or state assemblies. It will help to trace the missing women to breath at all. At the same time, it is also not untrue that crime against women is rising at an alarming rate (6-10 minutes per one).

Such conditions make the women special subjects of study for social scientists. It is also relevant to add that external measures to uplift women's status failed to produce any significant change in their plight. Therefore, hope resides likely in psycho-social and educational weapons against this evil, there is a fundamental need to understand the psyche (behaviour) of women at first and then to lay down recommendations for women empowerment and social justice.

This background motivated the perturbed authors to take on the job of inviting the articles from well known researchers for bringing a document. Authors are pleased to note that researchers

responded to the invitation overwhelmingly. Present book includes twenty seven chapters classified into following five sections:

Section I Identity and Worth (1 to 6 chapters)
Section II Development and Behaviour (7 to 11 chapters)
Section III Stress and Mental Health (12 to 16 chapters)
Section IV Double Burden Effects (17 to 21 chapters)
Section V Socio-Political Behaviour (22 to 27 chapters)

At the end of the book exhaustive index is also given for the convenience of the readers.

First section covers the issues relating to identity and worth of the women in the society. Dr. Surender Kumar reminds that woman has basically four major roles to play in her different stages of life and different positions in the family-as daughter, sister, wife and mother. While tracing the status of woman in vedic age, author refers to vedas, satyarth prakash and upanishads. Dr. Kumar has tried to demonstrate that by and large, woman was held in higher esteem in the vedic period than in any other age and she successfully excelled in four major roles, however, these days multiple role confusion due to fast changing world makes the situation more complex.

In 2nd article Prof Khan has raised questions regarding conflicting relations of women with men. He has tried to take up the issue right from vedic period to Manusanghita which travelled throughout history and cultures depicting woman as a victim of discrimination. In his opinion to ameliorate the women's position the strategy should be multipronged.

Third article is written by a sociologist, Dr. Madhu Nagla, who has traced the foot prints of the struggle being fought by the girl child for its survival. She has supported her conclusions with data of well reputed surveys. Although, this chapter has a focus on the position of girls child in Haryana but at the same time it

seems to be true for many more states. Dr Nagla recommends that health enhancing behaviours are going to be of great help in this context.

Prof Vidhu Mohan, a well known psychologist has described ideals, myths and realities in respect to education, financial independence and work of women group. She has highlighted that universalisation of education of girl child will make them competent to compete and this will bring financial independence. Thus, these three put together make the women feel self respect, dignity and wo.th as well.

In next chapter Prof Archana Shukla and Ms Swarnlata focus on realities of women lives. They also highlight how traditional psychology with men at the centre is sometimes at a loss to explain women's behaviour. Authors of this chapter express the need to develop feminist theories so that the same can be applied to reduce discrimination and domination.

Sixth chapter is again on the issue of gender inequality. Dr Madhu Anand and Dr Ramesh Verma talk about 'son syndrome' prevailing in society among all types of people. They stress upon to organise women groups at different levels who committedly work for women development.

Second section of the book is devoted to development and behaviour. There are five chapters in this section. 1st chapter of this section written by Dr Sandhya, is much more concerned with the problems of adolescent girls. In her chapter, she advocates the training of adolescent girls to adjust with their physical growth.

In next chapter Dr Shabnam deals with the problem of sexual harassment. Sexual harassment remains a pervasive problem in society. However, it is not only difficult to define sexual harassment behaviourally, but numerous personal and situational factors may affect people's judgement of an alleged case. Author suggests that one major step toward eliminating sexual harassment

is to examine people's attitudes and decision processes around such behaviour.

Prof Swaminathan presented session-wise plan of psychoprophylactic intervention to manage the labour pain. He has successfully used this method on his clients. The intervention procedure act upon the central nervous system of the women to get her relief from pain. It suggests that obstetricians and other health professionals including psychologists should work together to ensure physical safety as well as psychological fulfilment.

Tenth chapter is devoted to the management of premenstrual syndrome in a natural way. Mrs Richa Shri advances the nature, causes and management of premenstrual stress. She concluded that a combination of psychotherapy and drugs or alternate therapy give maximum relief. In Indian society, shyness is considered to be an ornament of a woman, although, researches involving shy behaviour observed that shy females exhibit a dysfunctional attributional style. Prof Vandana Sharma and her team recommended to undergo re-attributional training wherein their explanatory style could be made more self enhancing rather than self defeating.

Section–III represents the chapters concerning Stress and Mental Health among Women. Prof Anuradha Bhandari has provided a detailed gender analysis in respect to coping with stress. Stressful demands of living do not have the same effects on men and women. Since the ways in which one copes with life's stresses have implications for psychological and physical health, therefore, there is a need to study the coping processes inter and intra individually. Dr Das and Dr Kohli have examined the mental health status of women and cautioned that it should not be considered in isolation from social, political and economic issues. In a similar study, Prof Aradhana Shukla studied mental health of women in a cross cultural perspective and demonstrated that age and culture are significant determinants of mental health.

Dr Shalini Singh and her co-authors investigated effect of work-load on the self esteem and general well being of women respondents. They noticed significant differences between the groups. The 16th chapter involves a comparative study of old aged Eritrean women in respect to anxiety and depression levels. Authors of this article concluded that severity levels of both i.e. anxiety and depression are higher among those who are living alone.

Fourth Section of the book is solely devoted to the study of double burden effects. It is assumed that the desired or forced entry of women in service sector has increased this burden without lessening the same at domestic level. Dr Dhanalakshmi describes important correlates of stress in addition to the ways to cope with it. It her review, author identify health as a most affected area of working women. It is expected that advanced health researches may provide some light to deal with this problem, however, empowerment model of health has also been found to be of some benefit.

In a cross cultural comparison of working and non-working women in respect to life satisfaction and helplessness, Dr Waheeda Khan and her co-author observed that working women experienced more life satisfaction and less helplessness than non-working group of females. Authors are of the view that manifestation of satisfaction and helplessness attitude has far reaching consequences for women in this millennium.

In a similar study, Prof Promila Batra and Mrs Arti investigated the effect of increasing age and role multiplicity on life satisfaction of women. They observed that enhanced family income, changed lifestyle due to better financial conditions, an enhanced feeling of the power to take decisions and enhanced self confidence and self esteem in the working women seems to be responsible for higher level of life satisfaction as compared to non-working women.

Working women are the study subjects in another chapter written by Dr Sunita Dwivedi and Prof P.C. Mishra, where quality of relationship and marital happiness has been examined. Authors have suggested that husbands of working women should come forward to help in the problems of his working life because togetherness is the key to solve them. It is also relevant to add that happiness or unhappiness in marital relationship directly effects the growth and behavioural patterns of even the children.

As stated earlier, women in free India have been entering salaried remunerative occupations and professions in increasing number. However, this numerical growth of women taking up employment can be witnessed but at the same time it has seemingly caused depression and marital maladjustment as well. The findings obtained by Ms Veena Katyal and Prof S.K. Srivastava reveal that depression was high among non-working women whereas marital adjustment was better among working women. More so, in case of working women depression and marital adjustment are found to be significantly related at higher rate as compared to non-working women.

Last section of the book i.e. section V is about the socio-political behaviour patterns of women. This section consists of six articles contributed by educationists, economists, political analysts and psychologists. In chapter twenty second, Mrs Sarika Choudhary has presented an exhaustive review of the studies highlighting the role of woman in the process of decision making. Needless to say that there had been hardly any role of women in making the decisions about significant matters of the family to which she has worked stoplessly and tirelessly, however, this is also true that women's role in decision making has been increasing overtime. Author recommends that participation of educated and knowledgeable women should be ensured in decision making so that the given power may be put to proper use for the real development and betterment of the society in general and women folk in particular.

Another economist, Dr Santosh Nandal has elaborated many issues like drug abuse, ethnicity, labour force etc., as important determinants of stress, anxieties and frustration among women. The 'superwoman Syndrome' has led many women to over extend themselves in trying to do it all. Although, women's participation in income generating activities does not exempt them from household work. Dr Haseen Taj and Dr Mahesh Bhargava go many steps ahead and wish to empower the women through Information and Communication Technology (ICT). It seems to be the result of globalisation that ICT is accessible to a larger population in India as well. Authors are hopeful that economic, educational and political empowerment of women can be achieved through ICTs. Authors have also placed some good suggestions in this regard. A very important precaution has been given by Dr Ranjana Mittra which came while studying MBA students. Although, study is small but is sufficient to warn that feminine organisation proposed all the ideal conditions to women for an effective and happy work place but is not a practical solution to deal with the work place prejudices and biases.

Prof Nov Rattan Sharma and his team is looking for a comparison of need patterns among women across the life span. It was assumed that women of different age groups will express different groups of need patterns. Actually, authors have studied the personalities of these age groups through need patterns. The chapter demonstrate that age is a significant factor which decides the need profiles and finally reflect upon the personality make up of the person. It also confirms the developmental differences in regard to need preferences.

The last chapter of the book exhibits the political behaviour of the women. In an eye opener study, Prof S.C. Arora and his co-researcher conducted a survey about the level of awareness among women contestants of municipal election of a city held in 2005. It is pertinent to record that passage of historic 73rd and

74th constitutional amendments acts dealing with Panchayati Raj make provisions of one-third reservation for women in local bodies. The very purpose of this was to empower the women at grass root levels. However, results of the present survey yielded disappointing findings as results indicate that many women contestants were even unaware about the basic political/election process. Authors recommend that in order to enable the women to become real partners in the political process of the country there is a need to undertake extensive educating and awakening programmes.

Although, major aspects of behavioural dimensions have been discussed in the book at length but even though, editors feel that some aspects might have been left unknowingly. With the expectation that readers in general and women readers in particular will be much benefited from this knowledgable input, editors also hope that the book will fulfil its objective to disseminating the knowledge to masses.

If you look at the nature of problems being faced by girls/ women or ladies, it is probably because of the disoriented attitude toward this gender. And perhaps, the master key to resolve these problems and correct the attitude lies in imparting right kind of education. It is very well said that knowledge (light) is the only proper way to eliminate the ignorance (darkness). Education to women at all levels may be called as the backbone for the entire movement of women empowerment. It will also help to increase the knowledge, expand the experience and maximise the exposure for not only making the correct decisions but also catch hold the key position at higher level which in turn epitomise the empowering others. Education will also boost self confidence, self-efficacy, self-esteem self-identity, self concept, self worth and clear their mental block. It will also create awareness among women about their rights, duties, privileges, welfare schemes and at the same time antagonise the fear psychosis.

In brief, sole purpose of focused education is to make a woman as a fully functional individual. It is relevant to submit that the scientists have empirically demonstrated that strategy that focuses on holistic empowerment can address even poverty and other social evils. Adoption of a two fold approach i.e. (*a*) minimise the negative attitude strength and (*b*) maximise the positive attitude strength has emerged as a finest approach to deal with a social issue. At the end Editors strongly acknowledge the bold beginning undertaken by the Department of Women and Child Development, Haryana, It is a new beginning in the direction of Women Empowerment through SMS. SMS is *Shakshar Mahila Samooh*. It is a group of educated girls of a village. It is registered organisation working as NGO at village level with an objective to create awareness in villages on social issues such as declining sex ratio, education, health and hygiene, economic empowerment, environmental issues and welfare schemes of Government for women and children.

Editors dedicate the books to such organisations which are exclusively working for understanding and upliftment of the women. They also devotionally pray for the success of SMS objectives.

SECTION I

IDENTITY AND WORTH

1

Identity of Woman in the Vedic Age

Surendra Kumar

The Vedic Age is an ancient Age in Indian history. According to Indologists the Vedic age is considered the age of the *Vedas,* the *Brahmanas* and the *Upanishads*. So the details of human society in the Vedic Age can be gathered from a vast range of literature that includes the *Vedas*, the *Brahmanas*, and the *Upanishads*. For a true picture of the Vedic woman one seeks to invoke the collective evidence culled from these texts. Woman has mainly four roles to play in her different stages of life and different positions in family, as Daughter, Sister, Wife and Mother. So to determine the position of woman in Vedic society, author will discuss the roles and responsibilities of woman as daughter, sister, wife and mother.

Daughter

In Vedic Literature, daughter is called by a number of names, like *Duhitaa, Yoshanaa, Yoshaa, Kanaa, Kanee, Kaneenaa Kaneenakaa, Kanyaa, Kanyanaa*, and *Kanyalaa*. It is the most surprising to note that a daughter is hardly ever addressed by the name of *Putri* in Vedic Literature. It is important to know the exact meaning of these words as it may help us to draw a conclusion about the position of female child in the family of

Vedic age. Of these various names, the words *Kanyaa* and *Duhitaa* are used frequently for a daughter in Vedic literature and have survived to the present day. All other words have become almost obsolete. In the age of *Rig-Veda* and *Atharva-Veda* the words *Kanaa, Kanee, Kaneenaa, Kaneenakaa, Kanyakaa* and *Kanyalaa* have the same meaning as that of *Kanyaa* (*Sanskrit–English Dictionary*, 2005). In later literature the words *Kaneenaa* and *Kaneenakaa* acquired a new meaning—the pupil of eye (*Ibid.*). Shakuntala Rao Shastri observes that "It is perhaps from the affection felt for a girl that is acquired this meaning" (Sastri, 1952, 4). The etymology of the word *Kanyaa* also explains that she was not undesirable in the society (*Nirukta* 4: 15).

The word *Duhitaa* refers to a daughter. While explaining the etymology of this word Yaska, the earliest authority in Vedic etymology gives three possible explanations– *Durhitaa, Doore Hitaa, Dogdhervaa* (*Nirukta* 3:4). Accepting the etymology *Dogdhervaa* many scholars say that daughters specially helped the family in milking cows in Vedic age. But, based on this same etymology and the commentary of Acharya Durga, Dr. Munshiram Sharma strongly believes that the word *Duhitaa* yields the meaning of a daughter who, even after her marriage, keeps milking her parents' funds every time she would come back to her family home.

There is a practice which one finds even in modern day India. As per this practice, a married daughter comes intermittently to visit her parents and brothers, and each time she comes, they would give her substantial gifts in money and kind. One can rationalize this kind of patronizing of the married daughter, because in getting married and moving her to new home, she automatically loses all rights to her parents' possessions. It is for this reason that the practice of dowry started in ancient times. Dowry originally started out of a desire by parents to give their daughter a portion of their wealth with which she would start her

new home and family. This practice started since the time of the *Rig Veda*, for one finds references pointing to it. One of these references says that Suryaa's dowry reached her marital home even before her own arrival (*Rig Veda* 10:85:13). *Atharva Veda* makes mention of one hundred cows given as dowry (*Atharva Veda* 5:17:12). In Vedic times, dowry was never negotiated nor demanded, and so, was not perceived in negative light as it is today.

Based on the other etymology [*Doore Hitaa*] of the word Rishi Dayananda Saraswati explains that a *Duhitaa* is she who derives benefit from living far away from her parents' home. In the *Satyarth Prakash*, Rishi Dayananda Saraswati sheds light on this concept of a bride ultimately living far away from her parents' home. He says that marriage between partners living far apart brings together unrelated gametes, creates genetic variation, and so, improves the genes of the generation. On the other hand, marriage of near relatives does not improve the generation for want of interchange of fluids and essences of the body. Rather, the gene pool lacks variation and diversity, and so, the generation deteriorates. In further defending the concept of distant marriages, the Rishi avers that two young people, duly married, can never love each other to the desired extent, if, before their marriage,

1. they lived near each other,
2. they interacted with, disagreed with, and were infatuated with each other,
3. they detected each other's faults, imperfections, erratic outbursts and even misbehaviors, and
4. they saw each other nude.

These etymological explanations provide a clearer view of the Vedic society in which a daughter was a responsible figure in a family and taken care of by her parents and brothers even after her marriage.

There are many research scholars who claim that parents in the Vedic Age always desired sons as opposed to daughters, and they have based that claim because of the phrase *Putra Kaamanaa,* which ordinarily translates into *the desire for sons*. Authors disagrees with this popular meaning of the term *Putra Kaamanaa*. So, it is too quick to conclude with this claim that the birth of a daughter was never desired in Vedic society. A deep study of Sanskrit Language informs that the word *Putra*, in the dual or plural number, refers to both sons and daughters The great grammarian-sage Panini, while dilating on the principles of Sankirt Grammar, says, *Bhraatri-putrau swasri-duhitri-bhyaam*. (*Ashtaadhyaayee*, 1:2:68). For this reason, whenever a desire is expressed for many *Putras*, the implied meaning is that parents desire both sons and daughters (*Rig Veda* 7:43:3, 10:85:41, 10:85:42 10:85:45).

This explanation of the word *Putra* belies the claim from the scholars that parents in ancient times never desired the birth of a daughter. In fact, in early Vedic period nowhere one finds any mention that the birth of a daughter was never desired. Author finds evidences to claim that in early Vedic age sons and daughters, both were welcomed by parents. A father is recorded in the *Rig Veda* as praying that he may live a full and long life in the company of his sons and daughters (*Rig Veda* 8:31:8.). The *Rig Veda* talks of twin sisters lying in the lap of their happy parents (*Sam gachchha-maane yuvatee samante, swasaaraa jaamee pitror upasthe–Rig Veda* 1:185:5).

There is no doubt that, subsequent to the early Vedic Age, society slightly favored sons over daughters, and research yields some reasons for this slight favoritism. Sons, rather than daughters, were enlisted to fight in wars. Sons stayed with their parents to take care of them in old age (*Putraan vindaavahai bahoons'te santu jaradashatyah. Ashvalayan Grihya Sutra* 1:7:19), while daughters left to live in their married homes. Parents worried for

the safety and happiness of their newly married daughters when the latter began living in their new, married homes. For this reason, at one time, parents *preferred* the birth of sons over daughters. The *Aitareya Brahmana* echoes this preference by saying: *Kripanam hi duhitaa, jyotir hi putrah* (7:13.) which means that a daughter is misery and a son is light. This preference, however, cannot be interpreted to mean that parents totally disdained the birth of daughters.

In the Vedic Age, a daughter was not locked away in a home. She participated fully in all social festivities. *Rig Veda* records young girls with smiling faces being fully engaged in these social events (*Abhi pravantah samaneva yoshaah –Rig Veda* 4:58:8.). These social events were called *Samana*. These young girls, dressed in beautiful clothes and shining jewels given by their mothers (*Susankaashaa maatrimrishteva yoshaa vistanwam krinushe drishekam–Rig Veda* 1:123:11.), were perceived as attractive by young men. *Samana* festivities were occasions for young girls to choose their husbands. But; this freedom was up to a certain limit. The culture was such that young girls were always in the protective care of parents and brothers and it seems that they were the final authority to take the decision about the marriage of their daughters or sisters.

The words *Yoshaa* and *Yoshana* were used commonly for young girls and newly married young women. This common usage of these words and marital rites show that girls were married when they reached the age of young adults. In Vedic age girls were being educated properly and after completion of their education were being married (*Brahmacharyena kanyaa yuvaanam vindate patim–Atharva-Veda 1:15:18.*). Hymns and Verses attributed to Rishikas like *Lopaamudraa, Vishvaraa, Apaalaa, Ghoshaa* and *Shachi Paulomee* in the *Rig-Veda* (1:79; 5:28; 8:91; 10:39&40; 10:159) and participation of *Gaargee* in the assembly of Sages (*Brihadaaranyakopanishd* 3:8:2) and her highly

philosophical discussion with *Yaajnavalkya* show that the education level of the Vedic woman was very high. There are some cases of girls living with their parents all their lives. Such unmarried daughters were called *Amaaju* or *Pitrishad*. These unmarried young girls had rights to share their parental property (*Amaajooriva pitroh sachaa satee—Rig veda* 2:17:7.). Examples of such *Amaaju* women were *Apaalaa*, and *Aatreyi*. Examples of these two unmarried Rishikas suggest that marriage was not compulsory for a woman in Vedic times, but these are rare cases.

Sister

In Vedic Age, mainly the word *Swasaa* was used to mean *Sister*. In some places the word *Jaamee* also refers to a sister (*Rig-Veda* 10:10). As in every other age, sister in that Age was no different from daughter. The two are relative terms – the former in relationship with brother, and the latter in relationship with parent. In the home of the parents, sister could expect from brother the same protection that daughter could expect from parent. There is an exhortation in the *Atharva Veda* that brother and sister must live in harmony with each and not dislike each other (*Maa bhraataa bhraataram dwikshan, maa swasaaram uta swasaa– Atharva Veda* 3:30:3).

Regarding the relationship between sister and brother, western Indological scholars (Weber, *Indische Studien* 5:427:10,76) claim that the *Rig Veda* points to traces of incest—a sexual relationship—between sister and brother, and they make this claim based on their interpretation of the *Yama-Yami* Hymn. However, many traditional Vedic scholars vigorously disagree with this notion of incest in the *Vedas*. Western scholars can make such a spurious claim only because they fail to understand the true meaning of the twin *Yama-Yami*. The *Taittiriya Samhitaa* (3:3:8:3), supported by *Shatapath* (7:2:1:10) and *Gopath* (2:4:8) *Brahmanas*, defines Yama-Yami as *Fire and Earth*. However, even if one was to

consider *Yama-Yami* to be Brother-Sister, still one can never accept that incest existed in Vedic Times, because in the conversation between Yama and Yami, Yama declares that a brother and sister have never been engaged in incest (*Na yat puraa chakrimaa kaddha noonam—Rig Veda* 10:10:4), and that an incestuous relationship between brother and sister to be grossly inappropriate (*Rig Veda* 10:10:2), in fact grossly sinful (*Rig Veda* 10:10:12). The collective evidence found in this entire conversation conclusively denies the existence of the least trace of incest in Vedic Times. Yes, it is possible that incest *might* have existed among non-Aryan communities, although, of which is not readily available, and that Yami *might* have been influenced by this non-Aryan behavior and so, she made an incestuous proposal to Yama. But, as one now knows, Yama vigorously refused. Author concludes this discussion on sister by saying that a sister in Vedic Times was held in the highest esteem and she was always protected by her brother.

Wife

In the Vedic Age, several words were used to refer to *Wife*, principal among which were *Wadhoo, Patni, Jaayaa, Naaree* and *Nema*. The term *Wadhoo* is used to refer to a young woman who becomes a wife after having undergone the wedding ceremony and who is respectfully escorted by her husband to her new, married home (*Wadhoo* is defined as *Uhyate pitrigehaat pati-griham iti Wadhoo*). *Rig Veda* makes reference to a young woman – called *Wadhoo* –expressing a desire to find a husband (*Wadhoor iyam patim ichhantye'ti– Rig Veda* 5:37:3). At the end of the wedding ceremony, the husband would declare in front of the witnessing congregation as follows: "Here is my beautiful bride, my Wadhoo. She is an incarnation of auspiciousness. Come together, friends, and behold her beauty. I pray that you bless her with fortune before leaving today" (*Rig Veda* 10:85:33). After she gets married, she is called *Griha Patni*. Just as how *Pati* was

used to refer to a husband in the role of *Master of the home*, in the same way, the word *Patni* was used to refer to a wife as a *Mistress of the home* (*Grihaan gachchha griha-patnee yathaa'sah– Rig Veda* 10:85:26.). And, because she was referred to by the term *Griha-Patni*, one can assume without any doubt that she held equal rank with her husband in the joint management of the home. In addition, she enjoyed a most sacred and intimate relationship with her husband. This was conveyed by the use of the term *Jaayaa* that was used to refer to her. *Jaayaa*, based on etymology, means 'she in whom the husband is born again' Every child she gives birth to is her husband born again. Manu, following the *Aitareya Braahman* (7:13), states beautifully that "the husband, entering the wife and becoming an embryo, is born again on earth; a lady's wifeship is in the fact that her husband is born again in her"(*Manu* 9:8.).

In Vedic Times, a woman was called *Naaree* because she was invariably connected with her husband called by the term *Nara*. In the wedding ceremony, she herself takes on the title *Naaree* while she stands by his side making offerings of parched grains, and saying: While offering grains, this bride, this Naaree, prays for her husband to live long, and for her new relations to prosper in life (*Iyam naaryu'pa-broote - laajaan-aavapantikaa. Aayushmaan astu me patir - edhantaam jyäätayo mama swaahaa– Atharva Veda* 14 :2 :63.). And, because husband and wife were seen as two halves of one whole, the two of them forming a composite whole were addressed as Dampatee (*Atharva Veda* 14:2:8,11), and she, being his half, was called Nema in the *Rig Veda* (5:61:8). The *Aitareya Brahmana*, following the *Rig Veda*, also calls the woman *Ardhaanga* (the husband's half) (3:3:5-6), while the *Shatapath Braahman* emphatically asserts that a man, being incomplete, cannot attain the heavenly regions without his wife being by his side (5:2:1:10).

Vedic Literature points to a wife's various roles, functions and responsibilities while she lived and interacted in her new,

marital home. She was a queen (*Atharva Veda* 14:1:43-44) in her new surrounding; she managed the home and fulfilled the needs of her relations with a new found independence. She was considered a safe boat (*Atharva Veda* 14:2:26) for members of her household to cross the ocean of difficulties experienced in household life, and so, she was encouraged to be of kind service to her husband, benevolent to her father-in-law and pleasant to her mother-in-law (*Atharva Veda* 14:2:27). Society held her to high expectations, *hoping that* she would rise to be a "good wife of a man blessed with soul force" (*Atharva Veda* 14:2:31), and would *wake up* every day *before the earliest light of morning.*

Side by side with all of these functions and responsibilities, she was expected to unite her body with her husband's and beget children to ensure social order and functionality (*Devaa agre nya-padyanta patneeh - sama-sprishanta tanwas tanoo-bhih Soorye'va naari vishwa-roopaa mahitwaa - prajaa-watee patyaa sam bhave'ha – Atharva Veda* 14:2:32). However, half as she was seen to be, she could not execute all these functions without the active cooperation from her husband. *Atharva Veda* encourages a man in the following words: "O Pooshan! O husband, the giver of nourishment and support to the wife! Motivate your wife - she who is most auspicious (and who compares to the Earth, in which human beings sow seeds), who, desiring offspring, shall make herself ready for the procreative act, and in whom you, her husband, also desiring offspring, shall deposit the procreative seed" (*Atharva Veda* 14:2:38). Besides all their household responsibilities, women of the Vedic age were also, sometimes, helpful to their husbands in battlefields (*Rig-Veda* 1:112:10, 1:116:15, 1:117:11, 1:118:8, 10:39:8, 10:102).

Bearing all these responsibilities, roles and functions in mind, it is not difficult to understand why people in Vedic Times said that a wife is a home and a shelter for rest (*Jaaye'd astam Maghavan se'du yonih– Rig Veda* 3:53:4). By this statement they

meant that without the wife, there is no home, no comfort, and no joy for those living there.

From the above references one can understand that the Vedic people were living an ideal married life and it is evident that the early Vedic society was monogamous. However, there are some references in the Vedic literature those indicate about the polygamy. But; these were the rare cases, society in general was monogamous. Many scholars are of the view that in the Vedic age, widows were remarried, most likely to their husband's brother. They refer verses from the *Rig-Veda:*

(*i*) *Udeershyabhi jeevalokam.....didhishos'tavedm patyurjanitvambhi sam babhootha* (*Rig- Veda* 10:18:8);

(*ii*) *Ko vaam shyutraa vidhaveva devaram maryam na yoshaa krinute sadhastha aa* (*Rig- Veda* 10:422).

They refer verses from the *Atheva-Veda:*

(*i*) *Yaa poorvam patim vittvaathaanyam vindate param. (Athrva-veda* 9:5:27).

(*ii*) *Samaanloko bhavati punarbhuvaaparah patih. (Athrva-veda* 9:5:28).

But, some scholars like Swami Dayanada Sarawati have a different view regarding this matter. Referring the same verses from the *Rig-Veda,* instead of remarriage, Swami Dayanada Sarawati advocates for *Niyoga* (*Satarth Prakash,* Chapter-4). It seems that the remarriage of the widow was not insistent in that society. It was a need based social arrangement which later on, for some reason or other, converted in to *Niyoga* system. The burning of a widow with the corpse of her husband (*Satee Pratha*) did not exist in Vedic society (Shastre, 24-25).

Mother

As in the case of Wife, Vedic Literature uses many words to convey the sense of *Mother*, and they include *Maataa, Jani*,

Janitree, Prasoo, Ambaa, and *Nanaa*. By definition, *Maataa* is she who gives life to her children, and so, she is held in high esteem by her children. She also fashions the personality of a child (Saayana, *Rig-Veda* 1:164:8). *Jani, Janitree*, and *Prasoo* are three terms that refer specifically to the power in a woman to generate offspring. *Ambaa* and *Nanaa* are the terms used most times by children to call upon their mother (*Rig Veda* 2:41:16, 10:97:2, 9:112:3).

A Vedic Mother enjoys the closest relationship with her children. She protects her children in times of adversity, and she is seen as running to her children when they are in distress (*Rig Veda* 4:1:95). Her love for her child would make her engage in battle for his protection (*Rig Veda* 1:32:9). And, a Mother never denies her child an opportunity to play (*Rig Veda* 10:78:6.), while a child always bothers a mother in his childish pranks, even though she never feels annoyed (*Rig Veda* 10:94:14). It is no surprise, therefore, that most devotees prefer to see, and call upon, God as Mother. Even the *Atharva Veda* records a soul as saying that the Earth is his Mother, and that he is a child of Mother Earth (*Maataa Bhoomih, Prithivyo'ham Prithivyaah – Atharva Veda* 12:1:12).

The esteem in whom Mother is held is further augmented when she is perceived as having given birth to heroic children (*Yajur Veda* 4:23; *Shatapath Braahman* 3:3:112.*Yajur Veda* 4:23; *Shatapath Braahman* 3:3:112.), and as having inspired her children to embody noble virtues and rise to great heights (*Rig Veda* 8:77:1-2). Focusing on the fact that Mother is seen as God, a student who graduates from a school of learning is urged to treat his mother as God (*Maatri devo bhava – Tattiriya Upanishad* 1:11). In addition, a child would never become knowledgeable if such a godly, virtuous mother would be missing from his life (*Maatrimaan…..purusho veda – Shatapath Braahman* 14:6:10:2). And, when the time comes for the details of a child's wedding to

be finalized, it is the mother who makes most of the decisions. Author finds a reference in the *Brihad-devataa* when Shyaawaashwa was finally married to Daarbha's daughter only after the latter's mother had given her permission (*Brihad-devataa* 5:41).

The foregoing paragraphs have sought to show the high appreciation in which woman has been held in various roles, both in family and society. However, there were situations and circumstances that saw women being ridiculed and subjected to gross disrespect. While on one hand, woman was told that she was seen to be like God (*Stree hi Brahmaa babhoowith–Rig Veda* 8:33:9), on the other hand, she was denied the right to look around in any direction of her choice. She was specifically told to look downwards (*Adhah pashyaswa mo'pari– Rig Veda* 8:33:9), because, as she was led to believe, she could not keep her mind in restraint (*Striyaa ashaasyam manah – Rig Veda* 8:33:7). Her friendship was considered fickle and unreliable, and her heart was cruel like a wolf (*Na vai strainaani sakhyaani santi, saalaa vrikaanaam hridayaanye'taa – Rig Veda* 10:95:15.). For these reasons, she was denied any admittance into the Soma Worship, and was declared lower than evil-minded men (Tasmaat striyo nirindriyaa….paapaat punsah upa-tistaram vadanti- *Taittiriya Samhitaa* 6:5:5:2.). She was always perceived as emotionally charged and weak (*Kaathak Samhitaa* 28:8:44).

CONCLUSION

There is no doubt that over the Ages, woman, at times, has been held in the highest possible esteem, and, at other times, she was treated with the utmost disrespect. When she, based on her qualities, functions and responsibilities, rose to great heights, words were never enough to praise her. Such words of praise and commendation – suggestive of supreme excellence – author has recorded throughout this Essay. However, like their male counterparts, when women fell in society's expectations, parallel

words of condemnation were equally forthcoming, and in some cases with no compassion and understanding. What is sad is that the same words of condemnation did not come forth in the case of men when they could not perform as per the expectations that the Age, Time and Society have placed on their shoulders.

It is true that in the development of human civilization, the contribution made by women has exceeded that of men. It is very possible that many scholars may not agree with this thesis, and in support of their contention they may say that the contribution of men in major areas of human development is clearly seen, whether it is literature, science, agriculture, commerce, etc. But the reality is that woman has distinguished herself as the very foundation for the edifice of human civilization. Just as the foundation stone of any building cannot be seen but gives stability to that building, in the same way, it is woman who has given silent support and stability to human civilization. Man has always taken advantage of, and has always thrived on, woman's physical and emotional tenderness. In the history of all wars that have taken place in human civilization, it is woman who has suffered the most. And, in times of peace, it is woman who has stayed in the background, and has always yielded to man the opportunity to assert his abilities and to exploit all resources available in his immediate surroundings. Compared to Matter filled with qualities, woman has always selflessly served man (*Naanaavidhair upaayair upakaari'nyupakaarinah pumsah, Gunava'tyagunasya satas'tasyaarthakam'apaarthkam'charati—Saamkhya Kaarikaa - 60*). Despite doing all of this, woman has lived life, enduring countless trials and tribulations. History tells us that there was a time that she was denied the opportunity to become educated (*Stree-shoodrau naa'dheeyataam. Gautam Dharm Sutra*). She was proclaimed by those in authority to be the gateway to hell (*Dwaaram kimekam narakasya naaree. Carpat panjari* by Acharya Shankar) and so, she could not directly participate in all areas of societal development. And, it is interesting to note that it

is not only the East that has subjected woman to this abuse, but even western nations have denied woman the right to fully engage in all aspects of social involvement (*Vaidika Naaree,* Preface, p. 5).

In this so-called modern Age, woman is forced to wage a seemingly endless battle to defend her dignity. In such a context, author can say as a final conclusion that by and large, women was held in esteem higher in the Vedic Age than in any other Age and she excelled in four major roles—in the roles of daughter, sister, wife and mother. For this reason, as Rishi Dayananda has observed in the *Satyarth Prakash*, the Vedic Age was one that saw India as a thriving Civilization. Perhaps, in reflection, the society today might want to emulate a few aspects of the Rig Vedic Culture as regards women.

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2

Emerging New Identity of Women and Conflicting Relations with Men: Why!

A.M. Khan

Women despite enormous glories were treated subservient and dependent as compared to the men folk even during the Vedic Period. Their participation in the social, economic and political life was meagre. The genesis of men-women differentiation is deeply rooted into patriarchal, patrilineal structure of the society which warrants a daughter to depend upon her father, wife upon her husband and mother upon her son in social and economic spheres, responsibilities and well being. Women's status deteriorated with the indoctrination of *Manusanghita*. Manu perfounded theory of perpetual tutelage of women, which made vital contribution in creating discriminatory roles for men and women. It gave genesis of super-subordinate society, embedded with exploitation of women folk. It also generated cultural forces which compelled women folk not to develop an independent identity. The sense of male supremacy is deeply in-grained in the society in which most men cherish their sovereignty. They are conditioned to believe that manhood is a prize to be earned. Industrial revolution further segregated sexes into tender women and tough ones while deciding roles of men.

The ascribed and described status of women was never in the consonance of men's role profile even during the Vedic Period (Shastri, 1960) when they had high esteem and respect, centre of the domestic world. Even in those days they were supreme within the paradigm of home core activities; and outside the family, it was the men, symbol of strength, security, warrior, protector and source of safeguarding the women, although considered to be half as long as he remained bachelor.

Throughout history and cultures women have been the victims of various subtle and bizarre forms of discrimination, exploitation, all leading to criminal victimization. Sexual victimization of women occupies a significant place in the panel laws of every country and it is being considered as the most shading crime against women conscience and morality. This statement is indicating towards data of larger size that have got compiled in different offices, institutions and Ministries.

However, these data over the years have emerged out of just a marginal percentage of women who have opened themselves out of unbearable compulsions. But the majority of the sufferers are still the victims of "Culture of Silence". The exploitation against women are of many forms and these forms vary from culture to culture, region to region, religion to religion and country to country and it emerges as male violence against female more than female violence against male, why?

Women development demanded liberalization in the society a century ago. It also pressed for considerable change in the perception, opinion and attitudes and over all, 'social identity' of men and women. The attitudinal scenario of progressive people, duly facilitated oil the international arena, occupying the position in the Parliament and government resulted into women education and employment and enormous social, legal, political administrative and economic opportunities for the women. Despite the constitutional guarantees of equal rights and privileges in

existence over five decades (Sachchidanand and Sinha, 1984), regarding child' birth, upbringing, marriage, divorce, inheritance of property, ownership, custody of child, adoption, application of IPC and CPC etc., The suffering of women however, is in ascending order, why?

Where one is as far as 'women's happiness in the family' is concerned? Whether rural and urban scenario present similar status to the women? Whether development opportunities have knocked the door of all the women? Or opportunities are confined to a small section of society?

Ambivalence in the identity of men as cause of problem .The social, political, legal, administrative and economic privileges created for the women in the soil of Indian culture however, can contribute to family happiness significantly only when there is desirable change in the roles of men. There is a peculiar situation through which society is passing. On one hand, women are demanded for developing a new 'identity' reflecting self assertion, self-image and good self esteem, sense of economic independence, empowerment, power of decision making etc.; and on the other hand, men in the process of re-enforcing new women's identity, are faced to the trivial situation in which they are bound to abandon their physical comforts that they have been enjoying over the centuries as far as House Core Activities (HCA), major source of family happiness, is concerned. In other words, they are placed under the circumstances in which they have to relinquish a cluster of comforts deriving out of old roles. It is contrary to the women who are supposed to be liberated from the clutches of old values and are being-pushed towards new roles. There is very high incompatibility in the new roles of men and women. One reflecting towards fast changes in the roles of women and other type towards adherence of older roles giving a strong genesis of clash and conflicts. From this analysis it is apparent to conclude that the change in the identity of men is possibly a very slow phenomena because of perceived loss of comforts by men, whereas the process of change in the identity of women is a fast' growing phenomena.

These two in fact represent a situation condition vitiating the harmonious family relations in general.

Developmental and Stress Prone Life (SPL)

Women's development demanded liberalisation in the society; and this has already resulted in women's employment, especially in the urban sector,' particularly in big and mega cities. It has; undoubtedly brought an addition to the family income; but it has equally doubled and tripled the workload of women, considerably contributing to the 'stress prone life' (SPL). The stressors are numerous starting from early leaving of bed, cooking the breakfast, packing the lunch, dressing up the children, getting ready, leaving for job, some traveling, working in the office and repeating all the house core activities (HCA) till the late night. In the cluster of HCA activities if men's roles remain conventional and traditional, and they don't extend their hands to contribute to the culturally known Feminine activities, the possibility of stressors in the family is very high.

The women have already gone into new roles i.e. earning the money outside the family. Their expectations and assertions are to see the changes in the roles of men. If such legitimate expectations of the women are not fulfilled, the harmony of family is bound to be stressful, resulting into hot arguments clash and conflicts. Let there be an example of wife beating, family violence in the slum area, widely quoted in magazines, books, journals, newspapers. Women earn hardest money by employing themselves as domestic servant; men unemployed hardly having regular source of income torture wife/children to give money for drink. Drinking in such culture is considered as men's- prerogative. Dowry death, that is continuously increasing, is also a reflection of traditionally governed psychology of son and their parents. Families having conflicting phenomena of roles are highly stress prone and are likely to be victim of psychological problems such as adjustment, anxiety, depression etc.

Very unfortunately, nothing is being done to make the men ready for new identity while opening opportunities to the women to redefine themselves and develop a new identity. They are left to a *'situation of learning and delearning'* in the family which by and large used to be dangerous to a majority of the people. The education system and socialization process however, hardly contribute in developing new realization amongst the men in regard to the healthy development of the women. Men still strive for traditionally prevalent roles in the society despite being gain on the economic side. If the men embedded within the traditional .paradigm do not come forward quickly in changing their roles to accommodate and adjust themselves within a new role model required, women cannot be kept psychologically comfortable. The concept of *Patiparmeshwar* (Husband is God) is at stake to the women who have crossed the boundary of family and have entered into employment and new entrepreneurship both in organised and unorganised sector mainly due to strong possession of older roles and leaving house core burden to the women folk.

Recent Concerns

In order to change the scenario of women's status, new concerns started long back. And as a result of continuous attack by the social thinkers, there emerged a movement, which may be called 'Socio Political Movement', for the betterment of women's status. Gradually this movement was converted into 'National Movement' under the leadership of Mahatma Gandhi, who called women to step out of the confines of their home to join the *Prabhat Pheris*, *Satiagraha* and other related activities that became the vehicle of political freedom. It was one of the first attempts to draw Indian women out of restricted circles of domestic life into equal role with men. Writing in 'Young India' in 1918 Gandhi said, "Women is the companion of man. Gifted with equal mental capacities, she has right to participate in the minutest details of the activities of the man, and she has the same right of freedom

and liberty as he. By sheer force of a vicious custom, even most ignorant and worthless man has been enjoying superiority over woman which they do not deserve and ought not to have.

Perhaps the concern for gross discrimination between men and Women itself encouraged women to come forward and prepare them mentally to revolt against the hegemony of men. But such concern has grown up amongst a small segment of population, mostly urban middle class. Gradually, the very thought of differential positions of men and women in society and the realisation of the need to bring them on an equal footing, precipitated into National Policy for Women (1989) and Bill for National Commission for Women (1990). These, however, should be considered as only means to emancipate the misery of women. Whether these measures would be able to redefine the status of women and would generate new relationships between men and women cannot be stated at this juncture, because the dimensions for new relationship and image of new status of women are blurred.

Earnings and Expenditure

New status of women, which is largely being focused on the economic dimension, has, perhaps, created a new era for women. Women's entry into the employment, of course, would increase the economic and social status of the family. The issue which is directly linked with the economic independence is the expenditure. Earning by women is not a new concept. In fact, there are many tribal groups where women are sole earners of the family. But it is quite often seen that expenditure broadly remains under, the control of men folk. The situation in the slum areas/lower classes is even worse, where men are in the habit of drinking and abusing their wives and apply different manipulations to deprive them from their earnings. So earning does not ensure genuine expenditure. It does not provide even the feeling among a larger sector of women that they are earners. Therefore, earning and

expenditure should be closely linked with economic independence. This would not be possible till there is perpetuation of male chauvinism.

Changing Scenario of Man-Woman Relationship

In recent years concern for the role modification and role exchange, regarding new status of women, is getting some momentum amongst the urban intellectual and middle class people. The fact that fathers are showing what is invariably called 'maternal impulse' is the signpost of a larger breakthrough (News week, Editor). Men are venturing to express themselves in areas once anathematized as 'feminine'. The old rules of MACHISMO are changing, but in a very small segment of society (Well, 1979).

Once it is agreed that economic independence of women is must to promote healthy development of women; and once women's participation in the employment becomes essential feature of economic independence, appropriate family support would be extremely desirable. Under such circumstances the role modification and role exchange of men and women become essential requirements and change in the stereotyped roles of men and women becomes utmost necessity.

(*a*) *Women's readiness:* A class of society mostly educated and urban is undergoing exposure to men-women discrimination dialogue very fastly and specific reactions and counter reactions at cognitive and affective level are taking place. A large number of progressive women have started projecting a new and distinctive identity about themselves. They have started rejecting the culture of complete obedience and husband dependency syndrome. They have rather started questioning a series of family and society bindings which encourage older concept of men-women relationships. But nothing tangible is achieved as far as change in the roles is concerned. Most of the women at most of the times feel reluctant to acquire new roles.

(*b*) *Men's hesitance:* Men have always been gainer while the women were looser. Therefore, the change in the identity of men in terms of role modification and role exchange is most difficult task in comparison to the change in the identity of women. This is also conspicuous because of the fact that such change in the women is from inferior to superior while in the case of men. it is mobility from superior to equal or inferior position. Author is aware that the status of both men and women is viewed in terms of' superiority inferiority complex' in the existing social reality. The change among men is most conspicuous and crucial. for it may be counter productive to the very concept of family. Family is a sort of integration of divergent emotions of varied family members. The issue is, how far and for how long growing conflicting relationships between men and women resulting from new concerns could retain integrity of the family?

Changes in the Identity of Men and Women

The conflict between men and women emerging as a result of transition in their respective roles is basically due to inheritance of the old identity by men and acquisition of new identity by women. The men are relatively more comfortable with the traditionally defined identity whereas women are completely uncomfortable; they are rather having negative image about themselves. The identity of men appears to be non-mobile whereas identity of women is heading towards a positive side. Therefore, the relationship between men and women appears to be emotionally charged. It would create conflicting relations in the family. But such type of conflict may be transitory (phase based) in nature, and may be that once such forces are operated with appropriate supervision, when men are educated about such changes, when they realise that society should not develop lop sidedly on the criteria of sex when they develop a humanistic concern, and when the realisation of injustice caused by them to women becomes deeper, effective changes at cognitive and effective level would take place. And unless the basic attitude of

men towards women is changed completely, the possibility of conflicting inter-personal relationships in the family would keep on increasing. The pertinent question is who would play the important role in maintaining the *compatibility* between men and women and the integrity of the family?

Mindset

As a matter of fact, state of women status may be attributed to prevailing social system. And perhaps women also have worked hand to hand with men in this respect. This is not to blame anybody for what made women only passive recipients. How do they contribute such forces to grow against themselves is definitely an issue. Women are part of the social system and they cannot be separated from the system. The system first of all grows in the MIND and then takes its shape into social, economic, political and psychological behaviours. It is the 'mind aspect', that is 'psychology', which should get higher priority in the programmes for women liberation. However, the programmes being followed to liberate women do not take care of this aspect. These also do not touch the 'psychology of men', which could enable them to develop realisation about their misdeeds. On the contrary, such programmes are making them emotionally reactionary. And such efforts will meet undesired consequences. The western reality, regarding such aspects, could be quoted here as an illustration, where the concept of family has been challenged. Perhaps the gap between men and women has increased more than what existed in the past. The divorce rate has reached to 80 per cent in some western countries. New efforts of redefining the concept of family are in operation. Such developments could be treated as signs of progressive, developed and civilized society. But acceleration of mental health problems should not be undermined, because that is a sign of pathological society based on individuality.

There is hardly any change in the attitude of men. Success of new ventures of women liberation largely depends on how

speedily the attitudes of the men are changed. How quick men forget the role of machismo and how fast they forget the physical and psychological superiority over women, would determine the direction of change. Therefore, there is an urgent need to make endeavors on the psychological dimensions of change among both men and women. The success of efforts for new status of women depends on three forces. These are (1) change from within (i.e. self), (2) change in group (i.e. women folk) and (3) change from out-group (i.e. men folk)

1. *Change from within (i.e. self):* It is evident that in Indian culture a considerable number of progressive women, while demanding change in the role of men folk, fail to change themselves from within. They are so much entangled in the old 'man-woman relationship syndrome' that they considerably fail to set themselves free. This is a vital intangible force of conflict between men and women, husband and wife, which demands serious consideration by the facilitators of women's liberation movement. Women, venturing for new identity, need to develop realization and conviction about themselves. It would require modification in their hopes and expectations, which are deeply rooted in socio-cultural realities.

2. *Change from In-Group (i.e. Women Folk):* There is hardly any dispute that women's enemies are women themselves. *Sas-Bahu* (Mother-in-law and Dauthter-in-law) quarrels and conflicts have almost become a serious phenomena in this society. In almost all the cases of dowry, mother-in-law (a woman) is one of the important culprits. If women are to be liberated from the clutches of exploitation of male chauvinism, if the society desires to ameliorate the gloomy, picture of women folk, the discriminatory approach of dealing with daughter and daughter-in-law i.e. (*Beti-Bahu*) need to be completely changed. And this would not be possible till the present image of mother-in-law is modified and glorified. Whether education and legislation would be enough to

change this image is a million dollar question. There is need to develop some forces, either through voluntary organisations or government or both to educate the family.

Quite often, it is discussed that since women are always under the control of husband, therefore, women's, torture by the women is influenced by the male domination. But what is the truth? Whether women tortures woman on her own, or, she tortures on instigation of somebody, or, she troubles under some psychological forces, are matters of study. However, it is clear that to achieve' new status of women, one needs to have strong, supportive and encouraging force from the women folk. Failing such realisation and merely providing job opportunity, one would, perhaps, fail in achieving the desired aim.

3. *Change from Out-Group (i.e. Male Folk):* Here comes the .role of men is translating the ideas and perspectives for women into action. Men folk constitute a vital force that any type of women's movement should capitalise. Even if the women receive lesser support from the women, men can bring desirable results. The myth regarding women as less competent, less creative, has already exploded. The society has opened up for the women. It is only a matter of delay in the process of internalization and assimilation of new values regarding women/girls on the part of society. It requires change in the social definition of male and female child. It is only a matter of creating appropriate forum for women where they can blossom themselves.

The movement for women liberation must simultaneously involve a multipronged approach. Man to man, man to woman and woman to woman, these are three types of forces which must be developed under any movement to ameliorate the women's position. The hegemony of men to mobilise the society need to be changed through joint ventures. Any efforts to change 'male' chauvinism' should not create even a little opportunity for reactionism to grow, because if the element of reactionism is

encouraged under any package of women's movement, the consequences would be counter productive. It is both men and women together who should take up the Herculean task of changing men folk. The efforts that are in progress largely do not take care of such micro aspects. The issue, therefore, is what should be a scientific methodology of integrated efforts to avoid .conflicting reactions from men and women? The conflicts in the family and conflicting relationships between husband and wife are, growing largely due to differential and unintegrated perspectives (which are misconstrued) about women's development. It is, perhaps, men and women's joint federations which can play better role in bringing desirable changes in the status of women.

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3

The Girl Child: A Struggle for Survival

Madhu Nagla

Any one below 18 years old is a child and has the right to special care and protection. For every girl child, full preparation of her birth, her mother receiving pre-natal, natal and post-natal care is her right. In 1987 the SAARC conference on *South Asian Children* made an urgent call for improvement of the mother-child life cycle starting with the girl child. This desire took a concrete form by the decision taken at SAARC Summit held in 1988 to declare 1990 as the *Year of the Girl Child.*

In India, inhuman and deliberate neglect of the girl child has the support of religious sanctions and traditional practices and family support. The socio-cultural variables influence the rearing of the girl child right from the birth and restrict her role in the primary groups such as family and friends. The girl child at home shares the responsibilities of the household, i.e. looking after her siblings, grazing cattle, sweeping, cleaning, cooking, washing, collecting fodder, fuel, fetching water etc. She contributes substantially to the sustenance and growth of the household economy but her condition is neither being acknowledged by the elders not being compensated. The vicious cycle of neglect, inhuman indifference and conscious discrimination against the girl from birth dictates her future and perpetuates her low status.

A physically weak, emotionally ill prepared, illiterate girl, married at a very early age and forced to go through numerous pregnancies in order to produce more boys, whose economic individual rights to property are rarely respected, grows up into an ailing, weak deprived mother who hopes to have sons who will look after her in her old age. In unison with the male members of the family she too considers a girl a burdensome one, who will only be got rid of by a sizeable dowry. The latter subjects a woman to further indignities- the family she now becomes a part of have to be 'paid' to take and keep her, and her only real salvation lies in producing only boys. Too little dowry or any girl in birth can also lead to death (Bajpai, 1990).

Health of a girl child has been ignored over a period of time. Price (1994) has also mentioned that child ill health is described as 'silent emergency'. Mothers and children have been recognized as particularly vulnerable sections of the population deserving special attention. Priority has been given to them as they represent the least powerful members of society. For biological reasons the burden of disease and death seems to fall upon them, and all too often their needs have been neglected or misunderstood. Promotion of their health is important not only as an investment in the social and economic development of a community but also for the future of a nation as a whole. The reasons behind such vulnerability are multi-layered and reflect the interwoven nature of the life paths of both mother and child. The direct medical causes are well known. All are largely preventable. Individually, each of the conditions is serious in its own rights; however, it is worth emphasizing the synergistic relationship of infective, nutritional and parasitic diseases, as well act together to reinforce each other in a vicious infection-malnutrition cycle. To date, attention has been focused on the clinical causes, and yet this is only a partial picture. Behind the medical causes are the logistic censuses-failures in the health care system, i.e. the availability, accessibility and quality of appropriate preventive and curative services- and

beyond there are the underlying political, socio-economic and cultural factors that together determine health-seeking behaviour. One powerful factors underlies and reinforces all of these, namely women's health status and the inherent discrimination against them. Gender discrimination and health are all intricately entwined, and together significantly influence the health and survivals chances of the child. The dice are heavily loaded against females as social customs buried deep in tradition clearly illustrate a preference for male children, through workloads, feeding, education and even health care. Social programming from birth conditions girls into a role of sub-servience. In childhood, various 'rites of passage' subject them to the lifelong physical and psychological damage of circumcision. Early marriage, continuous cycles of pregnancy, inadequate diets reinforces poor health of women. With these effects reinforced by low social status, discriminatory traditional practices and poor environmental conditions makes women suffer more.

In most populations, female mortality rates are lower then those for males at all ages (Hill and Upchurch, 1995), apparently both because of male's higher degree of biologically-based susceptibility to disease and because of a higher prevalence of poor health habits and risky behaviour, especially among adolescent and adult men (Waldron, 1986). However, in many parts of South Asia with strong preference attitudes, the situation is reversed with higher mortality for females particularly during the second half of the first year and childhood (Arnold, 1997; D'Souza and Chen, 1980; Meegama, 1980). The evidence of an excess of female deaths in childhood is usually interpreted as the result of parental discrimination against daughters in the allocation of food (Behram, 1988; Chen, Huq and D'Souza, 1981) and health care (Rahaman, Aziz, Munshi, Patwani and Rahman, 1982), and relative medical and nutritional neglect of the girl child (Basu: 1989; Das Gupta, 1987) within the household. It has also been postulated that where behaviour can be sufficiently powerful to

influence outcome, there is consistent discrimination against female children in comparison to male children.

There is a growing body of literature which suggests that girls in India are discriminated against in the provision of health care but are not neglected in nutritional allocations. For example, in studies of six Deccan villages surveyed by ICRISAT, Walker and Ryan (1990) find that more boys than girls of pre-school (1-6 years) and school-age (7-12 years) were poorly nourished on a standard weight-for-age. In two studies of North and South Indian residents of a Delhi slum, Basu (1989, 1993) finds that despite supposed greater discrimination against girls in Northern India, there was a higher incidence of severe malnutrition among boys in North Indian sample. The converse was true in the South Indian sample. Indeed, North Indian girls had a slightly better diet than their brothers in the case of some choice of foods such as fruit and eggs, although they fared a little worse in milk consumption. Numerous other studies (Goplan, 1987; Nutrition of Foundation of India, 1988) suggest that nutritional imbalances are not a major part of gender inequalities in the region.

On the other hand, Singh, Gordon and Wyon (1962) find that girls in rural Punjab, India, receive less and worse medical care than boys in the treatment of fatal illness. Aziz (1977) finds that, of boys and girls who perish of illness in Bangladesh girls are less likely to receive medical care. Chen, Huq and D'Souza (1981) find that, despite free treatment of diarrhoeal disease in a *thana* (sub-district administrative unit in Bangladesh) and equal incidence of diarrhea among boys and girls, boys are more likely to be brought to the treatment centre. Summary of data from the NFHS (Kurz and Johnson-Welch, 1997) also suggest that boys are more likely to be immunized and receive health care at a medical facility.

The strong preference for sons over daughters and resulting discrimination against daughters in India is well known, though

the preference is not uniformly observed across different regions of the country. India exhibits wide variations in the degree of son's preference, with stronger son preference found in northern India than in the south (Dyson and Moore, 1983). A review of literature on this topic indicates that while the existing studies in India document the existence of sex bias, detailed state level explorations into the extent, pattern and nature of gender disparity in various possible parameters of discrimination has not been undertaken. Most research of this type has been concentrated in Punjab state of India (Das Gupta, 1987).

Objectives

The study examines patterns of gender disparities for children in health outcomes, including disease incidence, use of preventive and curative health care services and nutrition. The focus on health outcomes for children is mainly for the reason that these outcomes, such as child morbidity, are relatively less influenced by choices of the children themselves and potentially more indicative of differential treatment by their parents (and other adults) and hence may indicate more clearly one particular source of gender disparity. Specifically it addresses the following questions:

Whether boys more likely to have vaccination coverage than girls? How far girls are more likely to suffer from diarrhea? What is the difference in pattern of treatment between girls and boys? Are boys more likely to receive care for an episode of diarrhea as compared to girls? What is the difference in the nourishment between girls and boys?

METHOD

The data for this paper are mainly drawn from the Second National Family and Health Survey (NFHS-2), undertaken in 1998-99. However, the study is also supported by qualitative

information by taking group interviews with women during the field visit in Deegal village of Rohtak district between October 2005-December 2006. The NFHS-2 (Haryana) covered a representative sample of more than 90,000 ever-married women age 15-49 years. In Haryana, NFHS-2 collected information from 2,908 eligible women. The analyses for this paper are based on data from a sub sample of 994 children born to eligible women in the three years preceding the surveys and who were alive at the time of survey. The NFHS-2 provides high-quality, up-to-date information on all of the key variables required for the analysis. It has collected extensive information on child health indicators such as immunization coverage; prevalence and treatment of diarrhea among children; and anthropometric indicators of nutritional status for children born three year preceding the survey-all of which can be examined by sex of child.

Sex discrimination in nutrition has implications for reproductive health. Some women face difficulties in carrying a pregnancy successfully to completion because of childhood discrimination (Royston and Armstrong, 1989). Failure to nourish girl children can limit their capacity for healthy motherhood thou\rough, for example stunting and a small pelvis, while a reluctance to provide medical care may compound these problems (World Health Organisation, 1998). If a pregnancy goes wrong, lack of obstetric care may be fatal and millions of women continue to face such risks every year (Thaddeus and Maine, 1991; Royston and Armstrong, 1989).

It has been found that reasons for higher rate of infant mortality among rural girls are gender bias, absence of effective immunization of pregnant mothers and babies, poor primary health and lack of proper health and nutrition education. A UNDP report found that in Punjab people spent twice as much was spent on boys' nutrition and medical care compared that of girls. Nutritional status of children is a crucial indicator in determining quality of

life of people in a country. Malnutrition of children has adverse influence on morbidity, mortality and life expectancy. It stunts physical growth and development of children and leads to generalized functional impairment, disability, diminished productivity and inability to cope with environmental hazards including resistance to infection. A study conducted by Amartya Sen and Sengupta (as cited in Bajpai, 1990) shows that in West Bengal there was a 'systematic sex bias reflected in higher deprivation of girls *vis-à-vis* boys.... At every level girls were systematically more undernourished.

In examining child sex ratio one should, however concentrate on infant and child mortality since they affect the child survival the most. At the national level there have been a few years when infant mortality for females has been lower then males but it has been mostly higher. For example, between 1995 and 1999 the female IMR has been higher by a couple of points than male IMR(1995-Male 73; female 76; 1996- Male71; Female 73; 1997-Male 70, Female- 72; 1998- Male 70, Female 73; 1999- Male 69.8 and female 70.8) (Registrar General, India, 1999, SRS Bulletin, April, 2001).The female age specific death rates (ASDRs) for the age-group 0.4 and 5-9 years have also remained higher all the years from 1984 to 1998) (ASDRs: 1984- Male 38.6; Female 43.2; 1998- Male 21.0 Female 24.1) (Registrar General of India (1999), SRS Bulletin, April, 2001). It is noteworthy that the 1984-1990 data relate to the period when children aged 0-6 years counted in 1991 Census were born. Similarly, the data for the period 1994-1999 relate to the period when children aged 1-6 years were born (Premi, 2001). It is due to pathological causes, high morbidity and low nutritional status. Girls tend to be brought for treatment at more critical stages of illness or taken to less qualified doctors so their mortality even under treatment is likely to be greater. The higher mortality of girls under 0-6 years is largely responsible for the skewed sex ratio. Premi opined that at birth chances of survival for a male child are less than those for a

female child but after the neo-natal stage, social factors such as care, immunisation, nutrition of the mother and child, and sanitation come into force and govern the survival prospects of an infant.

Ghosh (1985) accord adverse sex-ratio because of high risk of female deaths from infancy to the end of the reproductive period; traditionally inculcated attitude of self effacement among women and infant mortality rate is higher for females than males. The same neglect is evident in exceedingly high maternal mortality rates, mainly because health care workers are in attendance for fewer than half the births. Female mortality rate up to the age of 40 years is higher than the rate of mortality. Although an increase in the life expectancy for women has been recorded in absolute numbers; in comparison to the life expectancy of males, it is still lower. Mitra (1979), for the first time in 1974, gave a warning that the continuous decline in sex-ratio of female to male would threaten the very survival of the female sex in India. He described Indian women as a 'declining sex'. The increased sex-ratio of the population during the 1980s was concentrated heavily amongst children. The data suggest that over a million additional girls went missing between 1981-91 that is over and above the numbers already implied missing by the skewed sex-ratios of 1981. Mean while, the sex ratio of child mortality have remained constant, suggesting that most of this may be attributable to the practice of sex-selective abortion or unreported infanticide. Excess female child mortality after birth continues to be the dominant practice in remaining female children in India. The rough estimates for 1981-91 indicate that there were perhaps four times as many excess female child deaths taking place after birth than before birth or as unreported infanticides (*Ibid.*). The sex ratio is adverse for women among all religious groups, and in both rural and urban areas. Even in the richest States of India (Haryana and Punjab), it is extremely adverse for women. The only region where the sex ratio is favourable for women is Kerala where the literacy for women is also the highest in India.

Haryana provides an ideal situation for exploring gender disparity in child health. It is a fairly well developed state with second highest per capita income in India (Government of India, 2001). It is also a state which has shown strong evidence of son preference (Table-1). It has the most unbalanced child sex ratio in India (Office of the Registrar General of India, 2001), which is a grim indicator of the persistence and severity of discrimination against girls and women. Of the ten districts with lowest child sex ratio in India, four are in Haryana (Office of the Registrar General of India, 1991). UNICEF argued that "female foeticide" is reported to be a cause for adverse sex ratio in some Indian districts in the 1991 Census (UNICEF, 1995).

TABLE-1

Selected Indicators of Son Preference, Haryana and India, 1992-93 and 1998-99

Indicators	*Haryana*		*India*	
	1992-93	*1998-99*	*1992-93*	*1998-99*
Ratio ideal no. sons/daughters	1.6	1.6	1.5	1.4
Proportion fully vaccinated (Boys/Girls)	1.13	0.99	1.08	1.05
Median duration breastfeeding (Boys/Girls)	1.24	1.10	1.07	
Prevalence of diarrhoea (Boys/Girls)	0.94	0.85	1.05	1.02
Proportion taken to a health facility or provider (Boys/Girls)	1.02	1.03	1.06	1.04
Proportion undernourished (Girls/Boys)	1.19	1.20	1.00	1.08
Proportion stunted (Girls/Boys)	1.12	1.12	0.99	1.06
Child mortality (ages 1-4 (Female/Male)	2.34	2.19	1.42	1.47
Excess female child mortality (%)	135	119	43	47

Source: National Family and Health Survey, Haryana and India, 1992-93 and 1998-99.

TABLE-2

Neonatal, Postnatal, Child and Under Five Mortality by Sex of the Child in Haryana State, 1998-99

Age group	*Total*	*Male*	*Female*	*Ratio Female/Male*
Neonatal mortality (NM)	34.0	32.2	36.0	1.11
Postneonatal mortality (PNB)	25.0	20.6	30.0	1.45
Infant mortality (1qo)	59.0	52.9	66.0	1.24
Child mortality (4q1)	21.4	13.8	30.2	2.18
Under-five mortality (5qo)	79.1	66.0	94.2	1.42

Source: IIPS (2001).

Note: Neonatal mortality: the probability of dying in the first month of life;

Postneonatal mortality: the difference between infant and neonatal mortality;

Infant mortality (1qo): the probability of dying before the first birthday;

Child mortality (4q1): the probability of dying between the first and fifth Birthday;

Under-five mortality (5qo): the probability of dying before the fifth birthday.

The pattern of sex differentials in mortality by age provides evidence of differential treatment of male and female children leading to higher mortality risks for females. The mortality rate for girls is considerably higher than for boys in every age group below age five years (Table-2). The ratio of female to male mortality rates ranges from a low of 1.1 in the case of neonatal mortality[1] to a high of 2.1 in the case of child mortality (age 1.4 years) (IIPS, 2001). According to a World Bank study (Filmer, King and Pritchett, 1998) the ratio of female to male child mortality in Haryana State is worse than in any country in the world. This is a State where technical means to identify sex through amniocentesis and ultrasound have been used to

accommodate the widespread preference for sons (George and Dahiya, 1998).

The female life expectancy in Haryana is 1.4 years less than for males (63.4 years for males and 62.0 for females) (IIPS, 1995). The birth rate is high (TFR is 4.0 compared to 3.6 for India as a whole). Women with sons in Haryana are more likely to want to stop having children and use contraception than women with daughters. By this measure, among all the States of India, son preference is strongest in Haryana (Mutharayappa, Choe, Arnold and Roy, 1997). Despite exhibiting strong preference, there has been little exploration of the nature of gender disparity in child health in Haryana.

Despite Haryana government introducing new schemes and incentives to check female foeticide in the state, it has hit a new road block with the deteriorating sex ratio in urban cities like Gurgoan. So to encourage the urban women, government has now prepared a series of plan including offering work-time options for women employees in government offices. The government has taken measure to strictly implementing the PNDT Act and prepared a proposal to provide work-period options for women working in government offices. Under this plan, they can work half day and take much of salary for a maximum of five years. Haryana would be the first state to initiate such initiative. This initiative would aimed to provide flexibility of work to the women in the state. The government is also working out modalities of loans for higher studies for girls with banks. The maximum interest rate for such loan would not be above 5 per cent. Urban educated would get the maximum benefit of this scheme and the maximum amount could go up to Rs. 20 lakh. Government has also announced that those person informing the health department of any foeticide would be rewarded with Rs. 5,000. To fight this tragedy, 300 delivery huts have already been in operation in the state (*Times of India*, 2007).

Analysis

Health status of children is expressed in terms of immunization status, prevalence of diarrhea and its treatment, anthropometrics among children.

TABLE-3

Percentage of Children Under Age 3 Years According to selected Demographic and Socioeconomic Characteristics, Haryana, 1998-99

Variables	*Percentage*	*Number of Children*
Bio-maternal Characteristics		
Mother's age at birth of child (years)		
<19	10.2	101
20-29	74.2	740
30+	15.4	153
Preceding birth interval		
First birth/>_24 months or more	18.3	182
<24 months	81.7	812
Child's Characteristics		
Sex of the child (Sex)		
Male	55.2	549
Female	44.8	445
Age of the child in months		
<6	19.4	193
6-11	14.1	140
12-23	33.6	334
24-35	32.9	327
Birth Order		
1	29.2	290
2-3	46.4	461
4+	24.4	243

Variables	*Percentage*	*Number of Children*
Socioeconomic characteristics		
Education level of mother		
Illiterate	49.1	488
Literate	50.9	506
Education level of Father		
Illiterate	23.0	229
Literate	77.0	765
Mother's current work status		
Not employed	93.3	927
Employed	6.7	67
Caste/Tribe		
Scheduled Caste	24.7	246
Non-Scheduled Caste	75.3	748
Religion		
Hindu	86.1	856
Non-Hindu	13.9	138
Area of Residence		
Urban	23.3	232
Rural	76.7	762
Access to amenities (piped water, flush or pit toilet)		
None	46.9	466
One/both	53.1	528
Ownership of television or refrigerator or motorcycle		
None	41.6	414
One/two/all three	58.4	580
Watches television every week		
No	40.6	404
Yes	59.4	590
Listens to radio every week		
No	69.8	694
Yes	30.2	300
Total	**100**	**994**

Source: National Family and Health Survey, Haryana (1998-99).

Table-3 presents information about the sample that was used in this analysis and summarizes some of its characteristics. Of the mothers in the sample, around 50 per cent have received no education, compared with 23 per cent of the fathers. This finding is congruent with the lower levels of female literacy in Haryana. It also indicates that 77 per cent of the sample lives in rural areas. 53 per cent of the sample have access to wither piped water, flush or pit toilet, 42 per cent own a television, refrigerator or motorcycle. 60 per cent of the sample watches television every week and 30 per cent listens to radio every week.

The first step in the analysis is to consider immunization coverage among the sub-sample of children aged 12-35 months. Based on information obtained from a cared or reported by the mother ('either source'), 65.5 per cent of children aged 12-35 months are fully vaccinated, and only 8 per cent have not received any vaccination. Coverage for each vaccination is much higher than the percentage fully vaccinated at least 87 per cent of children (Table-4). Although DPT and polio vaccination are given at the same time as part of routine immunization, the coverage rates are slightly higher for polio than for DPT, which may be because of Pulse Polio campaigns.[2] The overall figures for immunization coverage suggest that girls are slightly more likely to be fully vaccinated than boys (66 per cent versus 65 per cent). However, girls are slightly less likely to have received each of the individual vaccinations except measles. Mothers showed vaccination card for 26 per cent of boys and 22 per cent of girls.[3] While interacting with the mothers during the field work, it was found that most of the mothers whose children have been immunized were found ignorant about the different modes of immunization and about the need for administering different kinds of vaccines to prevent different kinds of illnesses.

TABLE-4

Percentage of Children Aged 12-35 Months by source of Information and Specific Vaccination, according to the Sex of the Child, Haryana, 1998-99

Vaccination Source	*Percentage Vaccinated*		
	Boys	*Girls*	*Girls/Boys*
Has vaccination card	56.2	59.8	1.06
Percentage fully vaccinated	65.1	66.0	1.01
Percentage ever vaccinated	92.4	91.4	0.98
Vaccines			
BCG	88.9	89.3	1.00
DPT-1	90.8	90.4	0.99
DPT-2	88.1	86.3	0.97
DPT-3	76.2	75.9	0.99
Polio-1	92.2	91.4	0.99
Polio-2	90.3	88.0	0.97
Polio-3	75.1	74.6	0.99
Measles	77.0	78.1	1.01
Total	**370**	**291**	**661**

Source: National Family and Health Survey, Haryana (1998-99).

The next set of question relate to the occurrence of diarrhea and the treatment that is provided to children who have diarrhea. Table-5 shows that 14 per cent of children under age three suffered from diarrhea in the two-week period before the interview. Among children under age three years, boys (13 per cent) are somewhat less likely to have suffered from diarrhea than girls (15 per cent). This table also shows the per cent of boys and girls under age three years with diarrhea during the two weeks preceding the survey, who were and were not treated for diarrhea, by where they were treated. For 93 per cent of children in Haryana who

suffered from diarrhea during the two weeks preceding the survey, medical advice or treatment was sought from a health facility or provider (a much higher percentage than the national level of 63 per cent). Seven per cent of children with diarrhea did not receive any treatment at all.

Table-5 also indicates that the proportion not treated is slightly higher among girls than among boys (7.6 per cent compared with 5.8 per cent), and the proportion who are taken to a health facility is slightly higher among boys than girls (94.2 per cent, compared with 92.4 per cent). But the proportion taken to a private health facility is also slightly higher for girls than for boys (75.8 per cent compared with 73.9 per cent respectively).

TABLE-5

Percentage of Children Under Age 3 who were Ill with Diarrhoea During the Two Weeks preceding the Survey and who were and were not treated for Diarrhoea, by where they were treated, according to the Sex of the Child, Haryana, 1998-99

Children with diarrhea where treated	*Boys*	*Girls*	*Girls/Boys*
With Diarrhoea	12.9	15.11	1.17
Not treated	5.8	7.6	1.31
Private health facility	73.9	75.8	1.02
Public Health facility	13.0	12.1	0.93
Both private and Public	7.2	4.5	0.62
Total Children	542	437	979

Source: National Family and Health Survey, Haryana (1998-99).

Poor nutrition is not only food and poverty problem but also socio-cultural problem of women in Indian society. It can not be denied that poverty is a major cause of malnutrition and undernourishment of women. Moreover, it is more unfavourable socio-cultural values operating against women in distribution of food. Optimum standard of nutrition is determined on the basis

of body weight, sex, climate, and nature of the work performed. More than half of the women in India do not get the recommended dietary intake of nutrients. Generally the poor nutritional status of Indian girls and women is part of a vicious cycle that has particularly devastating consequences for pregnant and lactating women and their infants. Malnourished women are more likely to give birth to low-birth weight babies, and if the underweight baby is a female who survives, she in turn is likely to continue to be undernourished throughout her childhood, adolescence, and adult life. This lack of nourishment has detrimental effects on her reproductive and lactating capacities.

Among many Indian families, the largest share of food is usually given to the bread earner, the next to boys, to the old or sick and the last, to young girls and women in the household (Nagla, 1999). Girls are often neglected in matters of feeding and health care. Discrimination in feeding may begin soon after birth as girls are breast fed less frequently as for shorter duration than boys. In recent years, increasing attention has been given to differentials in the allocation of food within households. However, rates of malnutrition among children and women are high. Ethnographic literature suggests that females are not fed as well, as males in northern India (Miller, 1981). Studies in Uttar Pradesh (Khan, Richard, Ghosh and Bairathi, 1989), Andhra Pradesh (Bidinger, Nag, and Babu, 1986), and Tamil Nadu (Devadas and Kamalanthan, 1985) all indicate that female children are discriminated against when it comes to the allocation of food within households. Marked differences exist between what is fed to boys and girls. The discrepancy increases with age. According to figures obtained from the National Nutrition Monitoring Bureau, in the age-group of 10-15 years, boys are fed 31 gm of pulses a day. Girls get only 25 gm a day. Boys get more of leafy vegetables, more of fruits and more of calcium. As children grow up and take up a sedentary or active job, the gap in the degrees of nutrition widens even more. For instance a woman in a sedentary

job get 403 gm of cereals a day. A man in a similar job gets 475 gm. (NNMB:1980).

TABLE-6

Percentage of Children Under Age 3 Years classified as Under-nourished on Three Anthropometric Indices of Nutritional Status, according to the Sex of the Child, Haryana, 1998-99

Anthropometric Indices	*Boys*	*Girls*	*Girls/Boys*
Weight-for-age (underweight)			
Percentage below-2SD1	31.8	38.0	1.19
Height- for-age (Stunted)			
Percentage below -2SD1	47.6	53.2	1.11
Both underweight and Stunted			
Percentage below –SD1	27.3	31.1	1.13
Total Children	487	389	876

Source: National Family and Health Survey, Haryana (1998-99)
Note: Each Index is expressed in Standard Deviation units (SD) from the median of the International Reference Population.
1. Includes children who are below -3SD from the International Reference Population median.

The last set of questions relates to nutritional status of boys and girls. Table-6 shows nutritional status of children in Haryana State as calculated according to "eight–for-age", and "height-for-age" measures.[4] Discrimination against girls in Haryana State is particularly pronounced in the nutritional status of children as depicted by these two nutritional indices. Under-nutrition is more common among female children than male children. For instance, 38 per cent of female children compared to 32 per cent of male children are underweight and 53 per cent of female children compared to 48 per cent of male children are stunted.

It has long been recognized that breastfeeding establishes the nutritional foundation of a child's future development. The duration of breastfeeding would therefore be one of the important

indicators of the future health status of a child. No explicit mention was made of gender-based discrimination made in respect of the number of meals taken or the type of food generally eaten by children in the overwhelming majority. However, girls were usually denied delicacies. Traditionally boys have always been given the best of what was available. It was noted that girls were discriminated against in the distribution of food within the family in quality more than in quantity.

TABLE-7

Median Duration of Breast Feeding among Children Under Age 3 Years by Sex of the Child, Haryana, 1998-99

*Mean Duration (Months)**	*Boys*	*Girls*
Any Breast Feeding	25.8	23.5
Exclusive Breast Feeding	1.0	1.4
Exclusive Breast Feeding or Breast Feeding plus water only	3.5	4.8
Number of Children	584	476

Source: National Family and Health Survey, Haryana (1998-99)

***Note:** Table includes only the two most recent births in the three years preceding the survey based on current status.

The mean duration of breast feeding is shorter for girls than for boys. This pattern is often observed in societies where son preference is strong, because the parents may stop breastfeeding a girl at younger age to increase their chances of having another child earlier with the hope that the next child will be a boy.

When the investigator asked about the reasons for less breastfeeding to the girls, most mothers responded that the girls are not welcome in our society and therefore, they are fed for shorter duration.

CONCLUSION

The data presented above concludes that in the state of Haryana, boys generally enjoy preference over girls in the matter of health care. Mortality and morbidity rates are apparently higher and severe in girls than in boys. The distortion in sex ratio also indicates bias towards girls. With respect to the health care girls are often neglected and for nutrition also girls get inadequate share of food and breast feeding as compared to boys. In nut shell there is struggle for survival of a girl child. However, society can work together to combat this struggle.

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NOTES

1. A slightly higher neonatal mortality rate for girls than for boys (12 percent higher) is unexpected, because neonatal mortality (which largely reflects mortality due to congenital conditions) tends to be higher for boys than for girls in most populations. Neonatal mortality was higher for boys than for girls in NFHS-1 (IIPS: 1995).

2. These results show that there has been considerable improvement in full vaccination coverage in Haryana since of the times of NFHS-1, when the proportion of children fully vaccinated was 54 per cent. The proportion of children who did not receive any vaccination declined substantially, from 18 per cent in NFHS-1 to 8 per cent in NFHS-2. The coverage of each specific vaccination has also improved considerably since NFHS-1, suggesting that many more children were brought into the programme in the six years between the two surveys.

3. In NFHS-1. vaccination coverage was higher for boys than for girls and vaccination cards were shown for a higher proportion of boys than girls.

4. The two nutritional status indices provide somewhat different information about nutritional status of children. The height for age index measures linear growth retardation among children. Children who are more than two standard deviations below the median of the reference population in terms of height-for-age are considered short for their age or stunted. The percentage in this category indicates the prevalence of chronic under-nutrition which often leads to chronic or recurrent diarrhea. Stunting is typically associated with inadequate food intake resulting from poor feeding practices or from the lack of sufficient food, as well as the existence of adverse environmental conditions for an extended period of time. Height-for-age, therefore is a measure of the long-term effects of under-nutrition. Weight-for-age is a composite measure which takes into account both chronic and acute under-nutrition. Children who are more than two standard deviations below the reference median on this index are considered underweight.

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4

Women, Work and their Worth

Vidhu Mohan

Human beings are the most important resource in the world. Out of this resource, women form half of the world population and therefore are valuable human prospect. Their education, emancipation, empowerment and status go a long way to augment the development of a nation. The social status of an individual is known by his/her education, capacity for decision-making, autonomy in thinking and financial independence. Financial independence to a great extent is linked with the competence to do independent work other than household chores. Education is a very important variable in empowering women and making them financially independent. It gives dignity and self respect. Yet in India, the female literacy rate is very low. Mohan (2000) has given a comparative picture of reality, myth and ideal perceptions about what one may want for our girl child:

Education

IDEAL	*MYTHS*	*REALITY*
All girls should be entitled to education. Govt. has made primary education free for girls.	Education is a waste of time, money, and effort since the girl should be taught household chores	The female literacy rate of 39.42 % and of that males 63.86 %.

For each boy 0.63 girls have been enrolled in school at the primary level while the figure is 0.51. at the middle level (Ghosh, 1989). Many parents hesitate to send their daughters to faraway and co-educational institutions. Recently in the state of Haryana (2006) many cases of girl student's sexual exploitation by male teachers was reported. As a result parents did revolt by withdrawing their girl child from the School.

The Girl was punished for the crime of the male teacher. While for a rural woman, education is considered unnecessary, and for an urban woman, it is merely a value raiser in the matrimonial market. Till education is seen as essential and relevant to the future role of a female, women's educational development will continue to be decelerated. In her study on feminine worth, Mohan and Bali (1994) found that the issue of educating the girl child received more support from females than males.

Another factor that goes to empower women is the decision making at various levels. Though there has been legislation about involving women in decision making right at the grass root level i.e. the village panchayat; yet in actual implementation one may find that it is still lacking. At the time of election, hardly 10% women come in the field.

The third factor for empowering women is the financial independence and security. Again though law is highly favorable to women but the implementation go haywire. According to Mohan (2000), this too has a myth, a reality and an ideal:

Financial independence is dependent on the woman's capacity to work and earn money apart from what she can inherit from father/mother or the in-laws. It is also governed by her capacity to invest money and make decisions about money matters.

Work – formally paid—and financial independence go hand in hand. Let us see what the scenario at this front is. What people perceive regarding the woman working outside home is also an

important aspect of woman empowerment. Mohan, (2000) has given a comparative picture of ideal, myth, and reality about work front.

Financial Independence

IDEAL	*MYTHS*	*REALITY*
The Indian law gives right to the daughter and daughter-in-law to the property of their father and father-in-laws' property.	The girl gets her share by way of dowry. Besides the right to property is that of the son as he is the torchbearer of the family name.	Despite the favorable law the girl cannot claim her right to property due to social pressures of the family and the fear of being disowned in terms of love by the brothers and in-laws.

Women and Work

IDEAL	*MYTHS*	*REALITY*
Both men and women have an equal right to work and earn.	Traditionally women's occupation is supposed to be to look after home and family.	The employment of women has added to their duties and functions. The working woman has two roles: the traditional mother-wife role, and the professional role.

Financial independence and work go hand in hand. When women start taking up jobs their financial position does go up. But the author has observed in most of her counseling cases that a working woman likes to hand over her salary either to her in-laws or to her husband and the latter decide what she will spend.

At the place of work, women are often face sexual harassment. The awareness and attitude change has compelled the Government to make laws against sexual harassment, to protect women from this abuse. This awareness is making men cautious not to exploit women sexually. Yet in majority of cases she does

not report or if she reports like the case of Ms, Rupan Deol Bajaj, has to face a lot of humiliation and mortification as well as social isolation.

But what about women who are full time housewives? Isn't the house job a more-than full time work? The concept of 'Istri Dhan' does exist. But in actual practice how many women are allowed the freedom to use it the way they want. Researcher feels that there is still 'a lack of effort to secure for women basic economic rights in the family in relation to property and shelter, pre-requisites of women's right to dignity and a measure of autonomy.'

In today's modern world, women are leaving the confines of the home to enter the male domain of work. This financial independence of the wife can be threatening for the man (Mohan, 2000). Researcher found as long as women work at positions no better than those of their husband's their work creates no greater problems. Mohan and Kapur (1985) explained that the Indian working women still has to find a midpoint between a super women who manages both home and work efficiently.

Perception of '*Feminine Worth*'

A woman's status is known by what society perceive about their worth. '*Feminine Worth'* is an index of the individual and collective role of women in society. It reflects the values of the society in relation to women and their attainments. The perception, the status and role of women in society by women is indicative of her own self-esteem." (Mohan, 2000). There can be various issues through which the feminine worth may manifest itself. The author in a series of studies (Mohan, 1999; Mohan, Banth, and Mohan, 1991; Mohan, Bali, and Mohan, 1996; Mohan and Bali, 1994; Mohan and Priyadarshini, 1998) identified 13 issues relating to women which reflect her status in society and studied the perceived worth of the woman in various cross sections of

society. These are: birth of a girl child, her education, her social status, marriage, dowry, marital adjustment, marital ethics, wife battering, widow remarriage, divorced woman, women and work, financial independence and flesh trade.

The cultural heritage of a country contributes a lot to its present day norms and values. A woman's status depends on how the people of that era perceive her worth and then act in accordance with the excellence that is perceived in women. A woman's self perception also makes a lot of difference. A woman' own perception of her self worth, self esteem, self value are of prime importance for her empowerment.

The author came across a beautiful poem to suggest how a woman can become empowered. It is not only money but how you feel about your self that gives you strength. Some excerpts from the poem are given below:

"A strong woman isn't afraid of anything...
But a woman of strength shows courage in the midst of her fear...
A strong woman won't let anyone get the best of her
But a woman of strength gives the best of herself to everyone...
A strong woman makes mistakes and avoids the same in the future...
A woman of strength realizes life's mistakes can also be God's blessings and capitalizes on them...
A strong woman has faith that she is strong enough for the journey...
But a woman of strength has faith that it is in the journey that she will become strong..."

The author has over a period of three decades, studied the changes in the perception of women's worth by various groups of both sexes from different strata of society, profession and walks of life. In this context what they perceive about women's education, doing work outside home and becoming financially

independent, has been measured over a period of time and with divergent samples. A scale to measure 13 areas of Feminine worth was developed by the author and her associates Mohan, 1999. Mohan, Banth and Mohan, 1991; Mohan, Bali and Mohan, 1996; Mohan and Bali, 1994; Mohan and Priyadarshini, 1998) These areas were;

1. *Birth* of a girl child.
2. *Education* of the girl child.
3. Her *social status* in terms of her rights, autonomy, and prestige in society.
4. In *marriage* does she have an equal say?
5. *Dowry* for the marriage of a girl.
6. *Marital adjustment*: whether it is only the wife who has to subjugate, make adjustments, and play a secondary role.
7. *Marital ethics*: is it only woman's duty to uphold fidelity and tolerate man's unfaithfulness?
8. *Wife battering*: is it accepted by society or considered a social problem.
9. *Widow remarriage*: does society accept it as much as widower remarriage?
10. The status of a *divorced woman*.
11. *Women and the world of work*: what type of reception do they get in the work place.
12. *Financial* independence and subsistence.
13. *Flesh trade* of women.

Out of these 13 areas only 3 factors are being considered for the present study, namely: education, women and work and Financial independence. These 3 are most important ingredient of empowerment of woman.

Methodology Used

The study spanned over almost three decades. The sample came from different sections of society, age groups and both sex. Below a table is presented giving the year of publication, the sample status and authorship.

TABLE 1

Year of	*1991*	*1996*	*1996*	*1998*	*1999*	*2000*
Public-cation. & Author	Mohan Banth & Mohan	Mohan Banth & Mohan	Mohan & Bali	Mohan & Priya-darshini	Mohan	Mohan
Sample	46 young females, 40 older females, 44 young males, 10 older males	155 adolescents of army & civilian back-ground, Both sexes.	150 army civilian male & female Adoles-cents.	126 female graduate & PG Students.	42 male Punjab Police SI's & ASI's	22 male U.P. Police SI's & ASI's.

Besides these groups the author did workshops on gender sensitization on some groups. One group was 40 female deputy superintendents and second group was 32 clerks from the Haryana secretariat. Another group was from Women and child development department of Haryana. There were 40 females and 45 males in this group. The third group was of 145 Bal Sewikas from Anganwadis. A group of 54 illiterate women primarily working as house helps, were also studied. There were 199 males and females in all. The scale of FWS (Feminine Worth Scale) was translated in Hindi and its reliability established. (Mohan, Bali and Mohan, 1996; Mohan and Bali, 1994; Mohan and Priyadarshini, 1998). The reliability coefficients of test re-test reliability and validity by using the English scale as criterion, are given below in Table 2.

TABLE 2

Test Retest Reliability Coefficients and Validity index of the Hindi version of the Feminine Worth Scale. (FWS)

	Reliability			Validity		
	Females-126	Males-125	Total=251	F	M	T
Birth	78**	70**.78**	78**	.55**	.71**	.74**
Education	.82**	.85**	.84**	.68**	.63**	.68**
Social status	75**	82**	.83**	.73**	.70**	.75**
Marriage	83**	79**	81**	.59**	.77**	.76**
Dowry	.70**	.83**	.79**	.78**	.78**	.78**
Marital adjustment	.62**	.65**	.71**	.75**	.59**	.67**
Marital ethics	.73**	.66**	.73**	.76**	.55**	.68**
Wife battering	.66**	.63**	.68**	.64**	.74**	.72**
Widow remarriage	.68**	.75**	.77**	.56**	.65**	.61**
Divorce	.67**	.62**	.62**	.63**	.61**	.60**
Women and work	.67**	.63**	.68**	.77**	.52**	.62**
Financial	.77**	.85**	.86**	.82**	.64**	.74**
Flesh trade	.78**	.68**	.73**	.68**	.82**	.68**
Total	.93**	.83**	.92**	.84**	.87**	.90**

** Significant at .01 level

This scale was administered to these groups in the presence of the author in small groups of 10 each.

For each of the 3 variables namely : Education of girl child, Women and work and Financial independence status, the range of scores was 4 to 20. A score above 15 was considered to be favorable attitude toward feminine worth. One's action is determined to a great extent on one's perceptions and attitudes are the end product of these attitudes.

RESULTS AND DISCUSSION

The attitude scores on the 3 variables namely Education of girl child, Women and work, and Financial independence status, were scored and then mean scores for each was determined. These are presented below in Table 3.

TABLE 3

Mean score on the 3 variables: Education, Work, Finanance

Previous work

Year	*1991*		*1996*		*1996*	*1998*	*1999*	*2000*
Areas of FWS	*Mean M*	*F*	*Mean M*	*F*	*Mean F*	*Mean F*	*Mean M*	*Mean M*
Education	12.9	14.6	13.6	15.9	14.7	19.5	15.1	15.7
Women and Work	14.8	15.2	14.1	15.7	14.8	15.6	14.3	13.1
Finance	14.2	16.1	15.1	17.9	15.9	17.2	15.3	13.6

Current study

	F=40	*F=32*	*F=40*	*M=45*	*F=145*	*F= 54*
Areas of FWS	*deputy superintendants*	*clerks*	*Women and child*	*Women and child*	*Bal Sewikas*	*Illiterate*
Education	16.9	17.19	18.6	18.7	15.8	8.5
Women and Work	13.55	13.95	15.64	15.73	12.3	10.3
Finance	13.45	13.81	14.1	14.2	126	11.5

Attitudes are a very powerful determiner of ones actions, reactions, responses and behavior. What one perceives about the status or worth of another individual influences the behavior towards that person. If one perceives the other person as competent, capable, proficient accomplished and worthy of respect, then one treats the person likewise. But if one perceives him/her as, incompetent, ineffective, incapable then the behavior towards

such a person is of disdain and disregard."(Mohan, 2000) The present paper also depicts the attitudes of different samples towards feminine worth through three variables.

Attitude Towards the Education of Females

The overall findings of this work spreading over 3 decades, shows that with passage of time, and more exposure to education, awareness for empowerment of women, the over all attitude towards educating the girl child has increased on the favorable side. From 8.5 which are on a very high negative side, it has increased to 19.5. But there is a corollary that this increase has been in the case of highly educated women. Women who are illiterate want their girls to remain illiterate and women like anganwadi workers who are high school level, their attitude even today is only very mildly favorable for educating the girl child. Without universalizing female education not much can be done for women empowerment. An uneducated woman is not even aware of her rights, much less financially independent. It is for this reason that she is still highly exploited at all fronts. Education makes one more assertive. An assertive person stands up for his/ her rights and goals and respects the rights and goals of others.

Attitude Towards Financial Independence of Females

Finance is an important variable in determining status. Though the Indian law is fair towards right to property for women, implementation of the rule is not guaranteed. Mohan *et al.* (1991) reported that the younger women is emerging with slightly favorable attitudes towards economic independence. Women like to talk financial independence but when one study their perceptions, the attitude is only mildly favorable.

Strangely enough the attitude towards allowing women to work and subsequent financial independence, has been of low favor earlier too i.e.' 1991, and today in the 21st century too it is

quite low. The range of scores has remained between 11.5-17.9. The over all means out of the 3 aspects of feminine worth , were the lowest as far as the right of woman to financial independence was concerned. The economic improvement of the condition of women, and altogether development, the perception of 'Feminine Worth' in its entirety, has improved for women as the years passed. Yet as far as financial independence is a concerned female themselves like clerks and Bal Sewikas and illiterate women have the lowest score. Some where women with lesser education still believe in financial subjugation. The male groups have shown a slightly better perception. For the educated females the mean scores are highest – 16.1 and 17.2; this highly favorable towards financial independence. This trend of financial dependence is also reflected in the UNO report "The UNO report also says that women do 2/3rd of the world's work, but earn just 1/10th and own just1/100th of the world property." (Mohan , 2000). All over the world this gender bias manifests itself and women seem to accept it. Goldstein (1975) found that 77% of the employed women in her sample of highly educated women turned over more than half their earnings to their families. In her earlier work the author had reported that "Though women in the older age group still accept the financial dominance of men, the younger woman is emerging with favorable attitude towards economic independence" (Mohan *et al.*, 1991).

Attitude Towards Women Taking up Work

Traditionally women's occupational status has always been closely associated with the home and the family. In recent times educational, political and social changes have necessitated a change in women's status and her role. The employment of women outside home has added to their duties and functions. The working woman has to perform dual roles, the traditional mother-wife role, and the other outside a professional role. But a problem that the working woman has to face is that of exploitation at workplace.

Most prominent amongst the exploitation in the work situations is sexual in nature (Mohan, 1994). In spite of all the hurdles, the women of the nineties are struggling to enter into non-conventional jobs, like Armed Forces, Police, Pilots, Engineering, which were earlier male's monopoly. Mohan *et al.* (1994) revealed that females showed more support than males towards female work participation.

In recent times educational, political and social changes have necessitated a change in women's status and her role But as far as the attitude towards women taking up work is concerned, the findings are not very rosy. In the present data the range of mean attitude towards women and work is – 10.3 to 15.73; only five groups of females have scored above 15, the rest of the 9 groups are scoring 14 or below. The Bal Sewikas who work in children's crèches or Anganwadi's for children have scored as low as 12.3 which is very low and unfavorable. But the illiterate females have a all time low score rather one should say negative attitude towards women taking up work. The people working in Women and child department of Government, have scored the highest but that to be 15. This shows that education and exposure to positive thinking about women improves our attitude towards them.

But with the changing times, attitudes must also undergo changes. There is a strong current for emancipating women, empowering them, bringing them at par with men as far as their rights are concerned. Both the genders have to grow in their respect for each other if families are to last, society is to exist amicably. Another problem that the working woman has to face is that of exploitation at workplace. Most prominent amongst the exploitation in the work situations is sexual in nature (Mohan, 1994). In spite of all the hurdles, the women of the nineties are struggling to enter into non-conventional jobs, like Armed Forces, which were earlier males' monopoly. Mohan *et al.* (1994) revealed that females showed more support than males towards female work participation.

The attitudes play a significant role in what one does. If one wants the women to be empowered, one will have to train them to go in for universalization of education of girl child. This alone will make them competent to compete in today's world where globalization has made the work scenario highly competitive. Work brings financial independence. The three put together make the woman feel self respect and dignity.

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Women: Lives, Behaviors and Choices

Archana Shukla and Swarnlata

In recent years considerable changes have occurred in the roles and status of women all over the world. Women have been gaining education and entering the labor force in ever increasing numbers. Yet, the social-cultural scenarios surrounding women are still at variance from those of men. Women's realities and women's choices, thus, continue to be different even amidst all the mayhem of techno-info advances that our society has witnessed in the past several decades. One can debate the extent to which changes in the nature and structure of work as well as in the orientations to work and in the family structure, introduction of push button technology, constitutional guarantees, growing awareness of equal rights and equal opportunities and an increased interest in the quality of life have actually resulted in enlightening and broadening of women's scope.

The roles of men and women in India have since long been clearly defined. The accompanying social statuses of men and women have also been different. Men are considered intelligent and superior to women while women are considered emotional and inferior. A female child is perceived as an economic liability to the family and is, therefore, not wanted. Unfortunately, it still is the scenario in most of the rural India as well as else where in

the urban parts of the 'India Poised'. This unfavorableness of attitudes also get translated in life's situations which are often less than fair for women.

Women work longer hours and their work is usually more arduous than men's. Women work roughly twice as many as many hours as men. Women's contribution to agriculture - whether it be subsistence farming or commercial agriculture - when measured in terms of the number of tasks performed and time spent, is greater than that of men. The extent of women's contribution is aptly highlighted by a micro study conducted in the Indian Himalayas that found that on a one-hectare farm, a pair of bullocks works 1,064 hours, a man 1,212 hours and a woman 3,485 hours in a year.". In contrast, a study in Uttar Pradesh reports that men only reluctantly conceded that their womenfolk really work. The researchers in this area were repeatedly told that "women, like children, simply eat food and do nothing". Women's work is rarely recognized and still less rarely rewarded. Is it any wonder then that it is often women who are hysteric, anemic and depressed? However, if all activities - including maintenance of kitchen gardens and poultry, grinding food grains, collecting water and firewood, etc. - are taken into account, then 88 percent of rural housewives and 66 percent of urban housewives can be considered as economically productive.

Traditional psychology with men at the center is sometimes at a loss to explain women's behaviors be it in the realm of education, entering or leaving labor market, owning and managing their movable and/or immovable assets, keeping fasts for their sons' and husbands' well-being, leisure and recreation, or else viewing their own personal competencies and capabilities. We, therefore, need to look at women in unique ways.

Attitude Towards Women's Role and Status

Sex role segregation both within and outside the family is a long established phenomenon. Families are characterized by a

clear division of labor and correspondingly clear lines of authority. There are two or more status levels and roles are differentiated. Men are assigned the instrumental role while the women, the expressive role. Men and women are concentrated in different types of jobs. Some jobs are regarded as exclusively male, others predominantly female and a third open to both. The difference in the labor force behavior of men and women can be explained from two theoretical viewpoints.

Dual career theory (Mincers and Polachek, 1974) suggests that actual as well as anticipated family responsibilities affect the kind of jobs women enter by limiting their investment in education, the number of hours they work, continuity of employment and opportunities of advancement.

The internal labor market theory (Doeringer and Piore, 1971) predicts that factors outside an individual's control (structural barriers such as characteristics of occupation, firm, practices, rules, norms, facilities, etc.) determine the kind of jobs in which men and women work. This sex typing of certain occupations has consequences for the person who happens to be of the 'wrong sex' for role participation and role performance.

Shukla (1995) explored the effect of gender, religion, family type and age on people's attitude towards the role and the status of women in India. It was observed that attitudes of women are changing faster than men. Men are more traditional and continue to think, feel and act in traditional ways. In the context of age, the younger cohorts were found to have more modern views and were less religious than older cohorts.

Fine Davis (1977) states that more religious groups are more likely to have a traditional sex role orientation, are more opposed to social change that would lead to greater equality, and less likely to perceive limitations in the housewife role than the people who are less religious.

The UN Secretary General Kofi Annan has stated, "Gender equality is more than a goal in itself. It is a precondition for meeting the challenge of reducing poverty, promoting sustainable development and building good governance."

Transforming the prevailing social discrimination against women must therefore become the top priority, and must happen concurrently with increased direct action to rapidly improve the social and economic status of women. In this way, a synergy of progress can be achieved because as women receive greater education and training, they will earn more money. As they earn more money they'll spend it on education and health of their children, as opposed to men, who often spend it on drinks, tobacco or other women. As women rise in economic status, they will gain greater social standing in the household and the village, and will have greater voice. As women gain influence and consciousness, they will make stronger claims to their entitlements - gaining further training, better access to credit and higher incomes - to command attention of police and courts when attacked. As women's economic power grows, it will be easier to overcome the tradition of "son preference" and thus put an end to the evil of dowry. (There are posters in Bombay advertising sex-determination tests that read "It is better to pay 500 Rs. now than 50,000 Rs. (in dowry) later.") As son preference declines and acceptance of violence declines, families will be more likely to educate their daughters, and age of marriage will rise. For every year beyond 4th grade that girls go to school, family size shrinks 20%, child deaths drop 10% and wages rise 20%. As women are better nourished and marry later, they will be healthier, more productive, and will give birth to healthier babies.

Self Concept, Self Esteem and Sex Role Identity

A mature, competent and self-confident woman is an asset not only for her home and family but also to the society. We need therefore to guard against elements that interfere with the

development of a positive self-concept among young girls. Many girls develop unfavorable self-concepts. As a result they become too critical and rejecting of themselves, do not value who and what they are and also what they do, and, make unhealthy choices leading to poor personal and social adjustments.

Hoffman (1972) states that the root of women's under achievement lie deep into their socialization experience starting from early childhood. Boys and girls enter the world with different constitutional make up with girls being genetically stronger than boys. Yet they are treated so differently by their parents and others right from birth (sometimes even before birth- incidents of female infanticide are a case in point) that girls often end up being weaker, anemic, educational drop-outs, commodities to be exchanged without their choice or say, depressed and dependent- the list is long.

The foundations of unfavorable self-concepts are usually laid in the home because self-concepts are mirror images of what children believe the significant others in their lives think of them (Chaudhry, 1998). While situations may change from moment to moment, or place to place, the images that people have of themselves are always the most crucial factors in determining their behavior. Sex role stereotypes make both men and women believe that males are superior to females and also that various masculine characteristics and abilities are more desirable and valuable than feminine characteristics. There is ample psychological literature that shows consequences of unfavorable self-concepts and low self esteem for performance in classroom or at the interview, level of aspirations, achievement, interpersonal relations, leisure activities, depression, mental health etc., particularly in the context of women.

Sex role standards thus exert real pressures upon individuals to behave in prescribed ways. Social scientists often express their concern over its possible detrimental effects upon the full

development of capabilities of both men and women. However, the more easily recognized victims are often women. A number of studies have documented that women fail to fulfill their intellectual potential, perform less effectively in the achievement settings and are assigned characteristics which are less positively valued than those which are assigned to men. This is sex typing.

Individuals are considered sex typed when they score significantly higher on either masculine or feminine traits, and as androgynous when they score highly on both. This classification of individuals on the basis of measurement of masculinity and femininity is shown to have important implications for self efficacy, psychological health, well-being, and adaptation. Sex-typed individuals are considered more constricted and behaviorally limited in situations in which sex-inappropriate or cross-sex-typed behavior is required. Sex-typed males show lowered supportive, playful, and expressive behaviors, and sex-typed females fail to maintain independence under external pressures to conform (Bem and Lenney, 1976). The presence of both masculine and feminine capabilities in androgynous individuals enables them to be flexible, develop better coping skills, and to effectively adapt across situations (Heilbrun, 1986). Androgyny is related to a sense of competence and fewer symptoms of stress in women but not in men (Flaherty and Dusek, 1980; Heilbrun and Han, 1984). Androgynous wives may be more effective, competent, and assertive in decision-making situations as compared to their feminine peers (Shukla and Kapoor, 1990). Androgyny thus may be considered as a resource that leads to positive and effective personal as well as interpersonal functioning in general besides having important implications for decision making and distribution of power in the family.

Family Characteristics and Women's Career Choices

Socio-cultural traditions and expectations teach the children from the beginning that boys and girls should behave differently

and have different characteristics. These sex roles repress the individuality of the children. Later on, such guidance is reflected in the sex- determined choices for educational courses as well as professions (Shukla and Chauhan, 1987). Studies on occupational segregation and attainment indeed show that men and women are concentrated in different types of jobs in many parts of the world (Ross, 1983).

In India, some 85-90 percent women are not employed. If at all they are employed it is in the low status, low paid, routine, repetitive jobs. The high status autonomy-responsibility oriented, better paid jobs are considered male work spheres. However, due to the information exposure, a little loosening of social norms and the forces of urbanization, industrialization and westernization, a greater percentage of women are now seeking higher education and professional courses. While most of them are still going in for traditional feminine jobs, a few can be seen making a break through in jobs that have all along been dominated by males. We have now women working as engineers, architect, administrators, scientists, executives, wine tasters, tour operators, astronauts, etc.

Tangri (1972) referred to such sex - atypical occupational choices of women as 'Role Innovation' that can be measured simply by the sex-ratio in a given occupation. A study by Shukla and Chauhan (1986) explored graduate students' perceptions of suitability of various courses/subjects for girls/ boys/ both and then examined family characteristics of sixty young women enrolled in various traditional vs. non-traditional career courses in Lucknow. They found that young women pursuing nontraditional career courses/subjects were more likely (1) to be first born, (2) from smaller families, (3) to have mothers who were better educated and (4) employed full time, (5) fathers having professional degrees and (6) fathers having professional degrees with higher income per month as compared to the those pursuing traditional career courses/subjects.

Women making choices of non-traditional careers belong to families that are progressive (that is why they are small); have a less discriminatory attitude towards the upbringing of the female child and a more favorable attitude towards the role and status of women in society. A greater quantity and quality of parental time / energy is available to the child in such families: quantity, because there are few people to share the resources; quality, because of higher parental education and socio-economic status. These children may naturally be exposed to a wider range of stimulation both within and outside the family and have more facilities and opportunities to exploit their potential. The high academic and occupational standards set by the parents offer the children an easily accessible model for role learning while at the same time imbibing in them a greater achievement orientation and higher occupational aspiration (Shukla and Chauhan, 1987).

Such forces can still be seen as working. It is observed that females even today are seriously under represented in high status, high prestige jobs and one of the root causes of this under representation may be the fact that the female child is given inadequate parental encouragement in early independence strivings (Hoffman, 1972). A number of previous studies have indicated that child-rearing practices are greatly influenced by parental beliefs, values and aspirations levels that in turn are shaped by their education and socio-economic status. Women's self confidence, evaluation of own ability, occupational aspirations and anticipations of future performances depend to a great extent upon such early socialization experiences.

But this does not mean that children from large families whose parents are not as well educated and earn only moderate salaries cannot achieve. They certainly can, because the basic capabilities are hopefully distributed without any consideration to class, caste, creed or culture. Only, they will have to strive more and to struggle more in order to achieve because their

psycho-social environment may not be as supportive or favorable (Shukla and Chauhan, 1987).

Personality Characteristics of Women in Non-Traditional Careers

Shukla and Chauhan's (1987) study of young women pursuing traditional career courses and non traditional career courses also revealed that there is a significant difference in the personality characteristics of the two groups. Women in non traditional careers/courses were more intelligent, capable of abstract thinking, emotionally stable, realistic, calm and mature, assertive, independent, happy-go-lucky, lively and enthusiastic, socially bold, spontaneous, practical, careful, and controlled by external realities.

Women in traditional career courses, on the other hand, were less intelligent and more capable of concrete thinking, emotionally less stable and easily upset, humble mild, accommodating and conforming, sober and serious, restrained, timid, careless, natural, and sentimental.

Holland's theory of vocational choice underscores that personality and environment interact in determining occupational behavior and also that individuals tend to gravitate toward and remain in occupations compatible with their personality structure.

Shukla and Chauhan (1987) found that women in the traditional career courses demonstrated greater conformity behavior and more dependence on parental advice regarding the career choice. Women in non-traditional career courses, on the other hand, were more ambitious; they looked forward to opportunities of being creative and original, and achieved higher prestige, status and better job opportunities by deciding in favor of non-traditional career courses. In conclusion it can thus be said that women choose different careers/courses perhaps because their personalities differ.

Women's Involvement in Paid Employment and the Emergence of Dual Career Families

Women's entry into formal economic structure is the most important of all changes that are taking place in women's roles. According to resource theory, the wife who works makes a valuable contribution to the household. She gains a valuable resource, money, with which to bargain within the marital unit and influence the power balance (Hesse-Biber and Williamson, 1984). Role segregation and unequal power structures are less common in working wives' households. Empirical data confirm that employed wives have greater power of family decision making than not employed wives.

Families with working women are referred to as dual worker or dual career families. Rapport and Rapport (1969, 1976) are credited with coining the term "dual- career families" to indicate 'a type of family structure in which both heads of the household - the husband as well as the wife - actively pursue careers and family lives simultaneously. In popular parlance, humorously (and at times also enviously and a little wickedly) they are also called DIGs or 'Double Income Groups'. Although in the past people often looked toward them both with curiosity and critique, they are slowly getting more used to women's idea of combining paid work with marital and family life.

In the dual-career families, each spouse aspires to get actively involved in the professional careers that demand intense ego involvement, long hours of work, much stamina, perseverance, psychic energy, etc. Such couples experience acute pressures and time shortage in trying to manage their work and family roles simultaneously. Time given to paid employment outside home is the time unavailable for marriage and family living. Since both spouses in the dual career families usually want to advance in their careers, some competition and conflict may arise between the spouses in these homes.

The dual-career lifestyle has created a unique set of challenges, many of which relate to socialization and role expectations, work role conflicts, and family role conflicts. Many couples have difficulty resolving role expectations because the likelihood is great that the individuals involved might have been socialized for roles very different from those they experience as part of the dual career lifestyle.

A woman who tries to combine a career and a family is sometimes reminded that she's flaunting the socially accepted norms. She may find herself in a seemingly no-win situation. The qualities associated with the role of wife-mother (nurturance, emotionality, responsiveness to people rather than ideas) are seen to be incompatible with those associated with ambition and success in the occupational sphere (independence, rationality, problem solving, leadership and assertiveness).

The man, too, has to struggle with his definition of masculine and feminine roles as he has been socialized to understand them. A man grows up expecting to be the head of a household, to be the one who earns the money and has the power. For the most part, men are seldom socialized to fill roles calling for skills in child rearing or homemaking. Even if a man has the skills, he may perceive that devoting a great deal of time and emotional energy to domestic activities may negatively affect his career, particularly if he is competing with other men who don't have similar family roles.

Challenges arising from coping with two careers in one household are evident. The result of trying to juggle two careers may be that each individual is less competitive in terms of his or her own career advancement. Each person has to make compromises for the other's career, and the net result is often that each ends up with a little less. The home environment is a special challenge to the dual-career couple as two people try to meet the

demands of careers and build a family life together. Maintaining a home and a family can tax even the most committed and energetic marriage partners.

It appears that most couples try to share the load. The standards are voluntarily lowered; some tasks may be eliminated or redistributed to domestic help, children, or spouses. Even so, the fact remains that in the majority of dual-career families, the responsibility for the domestic sphere lies with the wife. Even highly educated professional women retain that responsibility.

With few exceptions, even in families that had adopted this lifestyle from their beginning, the husband and wife hadn't worked out an equitable arrangement for sharing family roles. Undoubtedly, due to the socialization of both spouses, the wife assumed the greater burden for keeping the family unit running smoothly.

The wife, in most cases, in spite of her equally demanding job and relatively comparable salary, still carried the load at home. For many of the tasks described, the husband and wife accepted joint responsibility, but the wife usually and the husband occasionally actually performed these tasks. The husband may have supported his wife's desire for a have supported his wife's desire for a career and encouraged her to pursue one, but his behavior at home is best described as a helpful husband, not an equal partner.

When perceived stress levels were compared for matched husbands and wives, the demands of meeting child care, household maintenance, and clothing needs produced more similar levels of stress for both spouses than did meeting food and income needs. Women experienced more stress in meeting family food needs; men, income needs. It is perhaps noteworthy that these patterns of stress for meeting food and income needs appeared similar to those of traditional couples.

For working women it's a roller coaster ride trying to strike a balance between the challenges posed by career on the one hand and childcare on the other.

It is a fact that all women work. They perform dual roles of production and reproduction. Their work goes unrecognized because they do a variety of jobs daily that do not fit into any specific 'occupation'. Most of them are involved in arduous household work around the house. Although housewives work for long hours everyday (sometimes longer on Sundays and other holidays) and contribute substantially to family income, they are not perceived as workers by women themselves, their family members or other data collecting agencies and the government.

The so-called housewife is already doing a prolonged single shift. If a woman also works outside home, she is consistently working a double shift. When children or family members are ill, she does three shifts day after day. On an average, women work much longer hours than men. According to International Labor Organization (ILO), 2/3rd of the working hours around the world are worked by women because of the combination of various roles in the workplace, in the family and in the society. Most often, the women's work remains invisible but it contributes a major portion to the world economy.

Effect of Education and Marriage on Women's Work Attitudes

An increasing number of women are now becoming aware of their capabilities on the one hand and the societal restrictions on the other and hence strive hard to realize their potentials by seeking education and getting actively involved in economic activities. The impact that women's education and marriage has on their work related attitudes and behaviors is therefore worth exploring.

Work Involvement: Work involvement refers to a general orientation to work, and to the value and importance of work in the worth of the individual. Shukla (1987) found that employed women's involvement with their paid work was significantly greater in comparison to the involvement of not employed women with their housework. It suggests that paid work offers many financial, emotional and relational rewards besides being more definable, challenging and enriching. Having experienced the various tangible and intangible rewards of paid employment, the employed women become as involved in their paid work outside home as are men. In contrast, the not employed housewives cherish 'the traditional dream' and tend to idealize wifehood and motherhood. Some may not therefore want to enter paid employment; while others who do indeed desire to work are too scared to even admit it to themselves and explicitly express the same.

Work Satisfaction: Work satisfaction may be taken to mean affective orientations toward whatever it is that a person usually does. It may imply the satisfaction of employed women with their jobs and that of not employed women with their housework.

Shukla (1987) found that there is no significant effect of employment on women's work satisfaction. Not employed women appear to be as satisfied with their housework as employed women are with their paid-work. There could be several reasons for this. For example, the jobs of a majority of employed women are not very stimulating, challenging or demanding. Also, these jobs do not offer either decent salaries and opportunities of self-growth or a sense of pride. This is not so in the case of women working in high status, better paid jobs as these women demonstrate as high work involvement and work satisfaction as their other male colleagues.

Effect of marriage as well as the interaction of marriage and employment are significant both on work involvement and work

satisfaction. Among the not employed sample, single women as against married women have significantly greater work involvement.

Since these women have fewer homemaking responsibilities as compared to the married women they therefore find it easier to integrate the work role in their lives.

Shukla (1988) found that highly educated single women not only have an equally stronger desire to be engaged in paid work, they also have greater work satisfaction when employed than when not employed. Highly educated married women have an equally strong work orientation, but unlike single women, they are also satisfied with their housework. Less educated married women feel quite 'ok' about their housework but are least satisfied with their jobs perhaps because their jobs are more likely to be low-pay, low status ones, not offering enough rewards to compensate for the added burden of their labor force participation.

Igelhart (1980) suggests that non working women who choose to remain housewives should be helped to make free time more rewarding and stimulating, those who desire and seek employment should be given skill development training and vocational guidance, and those working women who are mothers of young children should be provided with child care facilities and social support networks.

Employment-Well Being Relationship for Women

Employment of married women and particularly mothers of young children has been a controversial subject for family researchers in India and abroad. The concern is aroused by the belief that employment adds to the already existing workload of house care responsibilities for the wife, more so for the mother with young children. In this context Gupta and Ganguli (1982) have noted that the negative effect of work on marriage is greater than the negative effect of marriage on work.

Shukla and Verma (1986) found that employed women felt no better than the unemployed women because employment may not be all that advantageous. Also, the housewife role is neither as degrading , frustrating, devalued and unrewarding as it is often made out to be in theory and research nor does 'being a housewife makes one sick' as has been observed by some feminists. Thus housewives and working wives do not differ with respect to their home, health, social, emotional and overall adjustment (Phadke and Kulkarni, 1977), their household and economic management and relations with various family members (Bhattacharjee and Bhatt, 1983) and in the frequency of their reports about positive and negative feelings (Shukla and Shukla, 1986).

Shukla and Verma (1986) examined moderating influence of parental status on employment - well being relationship of women. Parental status appeared to be one of the factors that decided whether a woman would benefit from being employed or not. They also found less favorable home role attitude, employment role attitude, low mental health and high role strain for employed mothers of young children aged 6-12 years and over 12 years. Working mothers of adolescent children appeared to have many problems integrating the two roles. The various developmental, emotional and social problems that adolescent children face might make parenting of these children more demanding and trying. When such family responsibilities combine together with employment great role strain and low mental health as well as less favorable home/work attitudes result.

Employed women no doubt have various financial and relational rewards but even then they do not seem to be problem free. Because of their simultaneous commitment to multiple roles, they have been shown to experience great conflict and interaction strain (Gove and Geerken, 1977, Parry and Warr, 1980). Employment influences, thus, seem to vary from negative through zero to positive depending upon an individual's aspirations,

occupational involvement and family obligations which in turn may vary with one's educational attainment and marital status.

Shukla and Shukla (1986) stated that single women when employed were higher in psychological well-being than when not employed. Besides money, employment also provided them an opportunity to get out of the house, to meet people, have companionship of fellow workers and develop a sense of accomplishment and fulfillment.

That employed women reported to be as 'happy' as the unemployed women indicates that there may be other equally gratifying sources in a women's life besides employment. Working women probably derive contentment from various employment benefits whereas housewives derive satisfaction through undivided attention to a variety of their roles as homemaker, affiliative ties and a relaxed life style.

In this study highly educated women were also found to report having more positive feelings when they had paid employment. Highly educated women when unemployed appeared to be more disillusioned and frustrated and their psychological well being was considerably low.

Bradburn (1969) also reported a consistent relationship between better education, higher income and probability of reporting 'very happy'. Women at lower educational levels were happier as house wives than as working women. This may be because of two reasons: (i) their jobs might not be as well paid and intrinsically rewarding as that of highly educated women and (ii) since lower educational levels are consistently associated with low socio-economic status, these women might had to work out of economic necessity and not out of choice.

Not all women can be expected to similarly benefit from paid employment. It depends upon the extent to which having paid employment is felt desirable by a women and also how

compatible this employment turns out to be with her family obligations and non-occupational environment.

Women's Employment and Distribution of Family Power

Herbst (1952) and Blood and Wolfe (1960) have given an interesting conceptualization of conjugal power using a fourfold scheme of categorization based upon the type of governing arrangements that prevail in families. Couples are categorized as (1) wife dominant, when wife's range of authority is considerably larger than her husband's; (2) husband dominant, when husband's range of authority is considered larger than wife's; (3) autonomic, when there is an approximately equal balance of relative authority, but the husband and wife's separate ranges are greater than the shared range; and (4) syncratic, when there is nearly a balance of relative authority, and the shared range of power is equal to or greater than the combined ranges of husband and wife. Such wives were found report the highest levels of marital satisfaction, whereas, those in wife dominant group were least satisfied.

The first two arrangements reflect autocratic power structure because one of the partners in the marital dyad makes unilateral decisions on most of the familial issues and thus has significantly greater authority than the other. The last two arrangements reflect egalitarian power structures because power is distributed somewhat equally, although differently, between the spouses. In the autonomic structure, power is equal but divided, with each spouse making independent decision in his/her area of interest. In the syncratic structure, power is not only equal but also shared, with the two spouses consulting each other on most of the familial issues and making joint decisions. Authority relationships may thus differ from one family to another in at least two respects: the extent of ranges of authority of husband and wife within which they function independently of each other, and the extent of a residual range of authority that is shared between the spouses.

Shukla and Kapoor (1990) found that husbands in dual career families had less power across various decision areas as compared to the husbands in single career families. Wives in dual career families had greater power than wives in single career families. They also found a positive relationship between wives' employment and masculinity/androgyny and their authority of decision making. They further found that employed wives' families were more often syncratic or wife dominated; not employed wives' families were more often autonomic or husband dominated. Also, the syncratic and wife dominated power structure were more often witnessed in the families of androgynous wives, while the husband dominated power structure was more common in the families of feminine-typed, masculine-typed, or undifferentiated wives. Syncratic families and husband dominated families reported that they were very happy with their marriages .in autonomic families, some were reports to be happy and some not. Lowest levels of marital satisfaction were reflected in wife dominated families.

When the wife is employed the husband will be relatively more involved in household decisions, while the wife will gain power in major economic decision making (Blood, 1963).the conclusion being suggested is that when the wife is employed , she loses control in routine aspects of the maintenance of the home but has greater power (Burr, 1973; Hoffman, 1960).

Shukla, (1987), found that the husbands in single career families but the wives in dual career families have greater power. Husbands in dual career families had greater power in decorating the house, clothes for oneself and money on clothes. The reason being that since the wives' are involved in their career their husbands are more independent and involved in the matters of the house. The wives in dual career families had greater power in major economic decision making.

The wives' employment status thus appears to have significant influence over the relative authority of husbands and

wives regarding decision making. The wives' of single career families had greater power in household matters.

Women's Employment and Marital Relationship

One of the most dramatic and pervasive trends of the present time is the increase in the proportion of married women who work and earn. Since women go beyond their boundary lines of their homes, they appear to be deviating from the sex based segregation of roles - husband provider, wife homemaker- that characterize the traditional more common pattern of the single career family.

In the 'deviant' dual career family such role boundaries get blurred as both spouses are employed and both share the child-care and house keeping.

Shukla (1989) found that career wives are neither 'happier' than the housewives nor more tense than them. It appears that employment per se does not solve or create problems for marital relationship. Wives' employment increases their marriage happiness perhaps because material as well as psychological benefits of paid employment balance the increased workload. Besides, the net effect of employment on well being could either be zero and not reflected in the measures of well being or would be positive or negative depending upon the relative strengths of the two opposing forces. Wife's participation in the labor force can thus be shown as having complex effects.

The Indian society lays more emphasis on family welfare than on individual growth and hence marriage and family are regarded as the ultimate goals for women. Here, affilitative ties with family members and kin are strong, and employed wives even today are not very common. Besides, marital interaction in various cultures is greatly influenced by the position of women in that socio-cultural setup (Upadhyaya and Shukla, 1995).

The fact that some housewives report to be as 'happy' as career wives indicates that there may be other equally gratifying sources in women's life besides employment. Their satisfaction from family relationships and a leisurely life style may just be two such sources (Shukla, 1987).

The most common and pervasive problem for the dual career couples is the lack of time and energy to get everything done. Since work roles by necessity take precedence, other roles related to marriage and the family becomes quite secondary. Discrepancies between normative role expectations and actual role enactments may arise causing role conflict and dissatisfactions and tensions in marriage (Tharp, 1963).

Role conflicts and marital tensions may in turn have important consequences for mental health and psychological well being of the individual. Clinical evidence has accumulated indicating that marital disturbances often precede psychiatric disorders (Vanfossen, 1981).

Shukla (1988) found that as compared to the single career couples the dual career couples derived much satisfaction from the provider and the therapeutic roles, expected that the husband and the wife should be about equally responsible for the provider and the house keeper roles, evaluated the wives more favorably in the provider role and the husbands in house keeper role, and evaluated their spouses less well in the recreation role. Shukla also noted that wives, in comparison to the husbands, derived less satisfaction from the provider role, expected themselves to shoulder fewer responsibilities of the provider role and evaluated themselves less well in the provider role. They obtained much satisfaction from the housekeeping and caring and disciplining children and evaluated themselves more positively in these and the kinship roles. Most wives evaluated their spouses 'a little above average' in housekeeper, kinship, and disciplining children roles. Satisfaction with kinship role, a favorable self evaluation

of performance of recreation role and fewer disagreements over various marital role was important for the marriage happiness. Satisfaction with the recreation role was important for all except the career wives. Career wives, perhaps because of the time demands, kept leisure and recreation at the lowest priority. In this study wives were found to derive greatest happiness in their marriages when they were satisfied with their housekeeper role and evaluated their husbands favorably in the provider role.

Gender Relations at Work

Men and women work together everyday for atleast eight hours in an organization. They frequently come in close interaction with each other. They sustain relations with subordinates, peers, and superiors and often with clients, customers, and agents. Besides, there is additional social activity at coffee and lunch. Thus, informal interactions may frequently accompany formal work activity.

Interpersonal interactions, whether formal or informal, are likely to be influenced by stereotypic ways of thinking and behaving which men and women bring to the work setting.

Studies suggest that men prefer same gender company to cross-gender ones and that female-female dyads interact at closer distances than female-male dyads. Also, women who enter predominantly male occupations tend to be excluded from informal interactions with male colleagues and hence do not receive information, resources, and support that come with inclusion in men's networks while men remain unexposed to valuable insights and views which female colleagues could offer. However, good, day- to-day interpersonal interactions are both individually as well as organizationally valued goals.

Shukla and Saxena (1988) explored differences related to gender and position in personality characteristics and styles of solving supervisory problems. They observed that as compared

to females, males showed greater organizational orientation and tolerance for disciplinary action. Also, a greater percentage of males showed concern with the boss's demands and sanctions while a greater percentage of females showed concern with team's demands and feelings, such differences being more pronounced among respondents who held non-managerial positions than those who held managerial positions.These findings support previous literature on sex structuring of occupations as well as prevailing sex role stereotypes that portray women as being mainly people oriented and men as being competitive and task oriented. True, in a society organized around occupations, a lack of task orientation is a psychological and economic problem. Yet, authors argued, how in a society made up of human beings, a lack of spontaneity, empathy and emo on is not equally problematic? What is thus required is a reasonable balance of emphasis on task and productivity as well as caring and giving. Many organizations have recently started to recognize this.

In another study, Shukla and Tripathi (1994) examined interpersonal relations at work among male and female employees at clerical and managerial levels. They found that in the work settings (1) females received more openness but less significance than males; (2) clerks received more control but expressed less significance than managers; (3)while managers expressed more inclusion, openness and competence than clerks. In short, the study suggested that the issue of control and competence between clerks and managers and that of significance between male and female employees could be crucial in the context of interpersonal interactions at work. Women are generally more empathetic and have strong nurturing tendencies. Also, women could encourage others to be more open with them as a strategy to gain others' approval and be included in their networks. When this is combined with the other observations that women are accorded less significance by their co-workers, the picture becomes more complete: coworkers feel less threatened by women and hence

are more open with them. Clearly, further studies and interventions are required so that specific interpersonal stressors could not only be identified but also smoothed, if possible.

Women in the Unorganized Sector

In India, the unorganized home-based workers constitute an important part of the working population. A wide variety of income generating activities are carried out in this sector involving large number of workers most of whom are women. These activities include beedi making, textile weaving, garment making, food processing, craft, coir work, dairy, chikan embroidery etc.

There are indications that in the unorganized sector, working conditions are appalling, wages are incredibly low and workers face great uncertainties and exploitations. Home-based industrial work is one of the least regulated, least supervised and most hazardous, systems of industrial productions. A large number of women workers are drawn into the organized sector mainly due to lack of personal resources, such as education and awareness, non-availability of employment opportunities and normative practices which restrict women's mobility outside home.

Very few studies are available which have focused on women engaged in the unorganized sector of home - based production. Sarna and Shukla (1994) did a study on a group of women chikan workers in and around Lucknow and found that they not only have health problems but also exhibit greater neuroticism than the other segments of the population.

Chikan embroidery as an income generating activity is physically strenuous and economically unrewarding. Almost all of the women reported either weak eyesight and/ or certain type of eye infections (such as pain, redness or watering of eyes). Most women also reported suffering from indigestion, stomach upsets, and menstrual problems because of not being able to consume nutritive food and living in unhygienic conditions. They

also reported severe backache, pain and swelling in the joints because they are required to sit long hours in the same posture for embroidery. They also reported problems of heaviness of eyes, wind formation in the stomach, feeling of thirst, lack of proper sleep, heaviness of head, sinking of the heart, forgetfulness. They could not tolerate loud noise and got irritated easily. Such symptoms may be broadly suggestive of heightened anxiety, nervousness, apprehension, stress and lack of self-confidence.

Thus, the disadvantaged groups are more anxious, high on neuroticism and rigid. This is caused due to low education and income, lack of social emotional support and an impoverished work and home environment.

CONCLUSION

The tone of this chapter, like its subject matter- women's realities, choices and behaviors- is quite mixed. To some it may even seem confusing. It can not be helped. Traces of both optimism and helplessness are as interlaced in the writings about women as perhaps they are in their actual lives. We move on from here.

Indian woman has achieved every heights laid for her. She has proved herself in each and every field inspite of adverse circumstances and conditions. Women have got immense capabilties, qualities and are worthy for any type of work. They work with full dedication and zeal. They have been seen playing very efficiently the multiple roles of a wife, a mother, homemaker, a daughter-in-law and also a professional worker. It is a great surprise to see a women who is considered as a 'weaker vessel' do such multi tasking so very skillfully and happily. This could be contrasted on the other hand with men who mostly play only one role - going to job and rest after returning.

The irony is that the potentials and capabilities of women are seldom acknowledged. The talents and scope with which she is born are left unexplored and sometimes even ruined by the

restrictive practices which are often too subtle to be visible. They don't receive the needed education to polish their talents. They work hard first in their parents home and then after marriage in their husband's home. They start bearing discrimination right frɔm birth. A common Indian proverb states, "Raising girls is like watering someone else's lawn". This proverb implies what India's attitude towards women is. It is surely not positive. We therefore, need to recognize the value of women- that she is a unique person, born with immense qualities, and who like Kalpana Chawla and Kiran Bedi has the ability to go much beyond.

We require to bring revolution in the point of views. Since she is unique and has to often work in unfavorable and unexpected situations , we require unique ways to understands her. This is an era of Human Rights. We need to protect the rights of women and enable them to live freely without any discrimination and domination. For this we need feminst theories and their applications.

Feminist theory aims to understand the nature of inequality and focuses on gender politics, power relations and sexuality. While generally providing a critique of social relations, much of feminist theory also focuses on analyzing gender inequality and the promotion of women's rights, interests, and issues. Themes explored in feminism include discrimination, stereotyping, objectification (especially sexual objectification, oppression, patriarchy etc. Feminism ideology can take many different forms. There are as many definitions of feminism as there are feminists. Each definition of feminism depends on a number of factors including ones own beliefs, history and culture.

Changing people's attitude and mentality towards women will take a long time—at least a generation, many believe, and perhaps longer. Nevertheless, raising awareness and educating young boys and men to view women as valuable partners at work and in life, for the development of a society and in the attainment

of peace are just as important as taking legal steps to protect women's human rights. Nehru once rightly said "You can tell the condition of a nation by looking at the status of its women."

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Women Many Steps Behind Men: Inequality

Madhu Anand and Ramesh Verma

A woman when takes birth, she is the daughter, becomes wife after few years and later on she is the mother of children. Manu in 200 B.C. has stated that woman is never independent; as a daughter, she is dependent upon father, as a wife she is dependent upon husband and in the late years when the king is no more, she is now dependent upon sons. Thus, a woman with advancement of age changes her dependence one after the other and acts accordingly. Once the woman in the identity of a child is born, she plays her roles potentially and responsibly; this can be known when one visualizes her in different images.

In India, a girl when getting married is given wedding blessings with hundred sons, never she is blessed with hundred daughters. Birth of a girl in the family is unwelcome and bringing up of girls is considered or thought to be watering in neighbourer garden. This discrimination is "Gendercide". Gender does not mean simply male or female, it means the roles assigned by society to males and females. What is gender? Gender refers to socially determined difference between women and men, such as role, attitude, behaviour and value. Gender roles are learned and

vary across the culture and time and they are thus amenable to change. Gender is a relational term which includes both men and women equally.

Gender equality focuses on changes for both men and women. Gender equity is the process of being fair to both men and women. Equity leads to equality. Equality means that both men and women enjoy the same status within the society. It does not mean that men and women are the same, but their similarities and differences are recognized and valued equally. Gender equality refers that men and women experience equal conditions for realizing their full human right and have the opportunity to contribute to and benefit from national, political, economic, social and cultural development (Sunderlal, Adarsh and Pankaj, 2007).

The issue of female child has always been a question. There is a string preference or "Son Syndrome" as male children are considered assets while female children are considered liability. Sons are considered essential to keep the family alive: run generation and for that reason all families pray; "O God, grant the birth of a son here and a daughter elsewhere." Sex ratio is attributable to sex selective abortions (foeticides) through sex determination, as also to female infanticide in some States. It also unfold the story of high mortality in girls during early childhood and sex selective sterilization and some faults in female count (it is negligible factor) (NIPCCD, 2003). During 1991, the sex ratio for the total Indian population was 927 (females per thousand males), it increased to the mark of 933 in 2001, an increase of six points (Bose A., 2001). The extent of anti-female bias in India is by no means limited to poor income society. Punjab and Haryana, two of the richest states in terms of per capita incomes, have among the lowest female to male sex ratio; 861 women to 1000 men in Haryana and 870 women to 1000 men in Punjab (Census, 2001).

Overall proportion of children (0-6 years age) has been declining in India, a favourable trend indeed to attribute to the success of family welfare programme intervention, however the declining female child sex ratio over the years is a disturbing trend (Sunderlal, 2002). Further the census 2001 explaining the most disturbing and alarming aspect of census reports a sharp fall in sex ratio of children (0-6 years age) from 945 in 1991 to 927 in 2001, a significant decline of 18 points. When the 0-6 years ratio is observed state-wise, it reveals further distressing situation in the States like Punjab (793), Haryana (820), Chandigarh (845), Delhi (865) and Gujarat (878). District-wise data on child sex ratio in these states is quite astounding. In the State of Haryana, during the last decade, the sex ratio (0-6 years age) declined in all the districts. The maximum decline was of 104 points in Ambala and in Punjab State, the decline of over 100 points was observed in Kapurthala and Patiala districts. All these districts are prosperous and literacy rate being much higher than rest of the districts of the States. This shows that sex ratio has nothing to do with literacy or being educated. Imbalanced sex ratio at birth, female foeticide and higher rate of mortality among girls may perhaps explain this phenomenon (Gulati, 2001).

The unfavourable sex ratio for girl child (0-6years) in prosperous states of North India could be attributed to sex selective abortions thereby interrupting natural history of reproduction. There may be many economic reasons for this, foremost among them being the practice of dowry and son preference in the family. Data of National Family Health Survey-2 (1998-99) confirms that 33% of women prefer sons than daughters and over 85% wanted at least one son among their children.

The availability of sex-selective technology PNDT (prenatal diagnostic technique) has led to elimination of female child. The greatest decline of female child sex ratio have been observed in the States (where sex determination test came at the earliest) of

Punjab, Haryana, Gujarat, Maharashtra and Delhi etc. A significant part of this decline is due to selective abortions of female foetuses. Though the prenatal diagnostic technique act was enacted by the parliament in 1994 to reduce imbalance in sex ratio but its implementation is quite tardy in most of the States. Following the Hon'ble Supreme Court directive in early May 2001, the Govt. of India has decided to implement the Prenatal Diagnostic Technique (PNDT) Act, 1994 (Thakur, 2001).

The falling ratio of girl child, crime against women and exploitation of women are blots on civilization and human development. These areas should be high on agenda for policy planners and implementing agencies at all the levels. India has the "Women Commission" at National level and many States have also set up "Women Commission" and have developed action plans to empower women. Year 2001 was observed as year of "Women Empowerment". National policy for women empowerment has been evolved and similarly World Population Day July 11, 2001 focussed on gender imbalance (Sunderlal, 2002).

Today's scenario presents the image that roles of males and females are equally shared but it is not true, as the female is over burdened with maximum roles and responsibilities. Her assigned roles are purely for female character those can not be shared with males exactly. It also becomes visible in the early childhood, in upbringing of girls *vis-à-vis* boys in the family in terms of nutrition, health care, opportunities for education, skill formation and household work that the girl child is expected to share (Kishore, 2006). Women grow most of the developing world food, market most of the crops, fetch most of its water, collect most of its fuel, feed most of its animals, weed most of its fields. When their work outside the home is done, they light the third world's fires, cook its meals, cleans its compounds, wash its cloths, shop for its needs and they bear children, rear children

and do a variety of household chores. The message is clear that men must share the work load of women to enhance the health and status of women. Women's workload in home, farm and field is quite heavy and it is seldom recognized. Women do much more work then their men counterpart. They are never found resting and keep on working and workload is quite energy sapping (Sunderlal, Adarsh and Pankaj, 2007).

The concept of second rate child for a girl is clearly perceived in the society. A girl is always toned and conditioned that she is not number one and according to the mindset of the family members, they view her inferior to the boy. Women eat less and last of all in the family. Food distribution within the family is an important issue. The feeding practice for female children, adolescent girls are discriminatory and consequences are poor nutritional status of young girls. Over 80% of adolescent girls and pregnant women tend to be anemic. Dietary practices for girls and women are unfavourable as compared to men. Enrolment ratio, retention and continuation rate of schooling in females tends to be low and low literacy of girls and women is a discriminatory practice and significant inequality in the society. Low literacy, early marriage and early pregnancy puts them to added risk in their life. Low literacy of female means less of information or lack of information on health, development and advancement; a permanent disadvantage in life. While 85% of ever married women participate in decision about what to cook, only about half participate in decisions about their own health care. Most women need permission (or are not allowed at all) to go to market (68%) or to visit friends or relatives (76%). Only 66% have access to some money that they can use as they wish. Autonomy of women is somewhat high in Himachal Pradesh, Punjab and Rajasthan, Uttar Pardesh, Madhya Pardesh, and Bihar. National Family Health Survey-3 (2005-06) show that currently married women who usually participate in household decision was 56.3%.

Talking about the gender equality has been very common, but in real only a few segment of Indian society accept the importance of a girl. Spiritually and ethically motivated individuals only portray women equal or superior to men. In few places, women is treated as "Devi" or "Goddess". Over 250 religious leaders discussed ways of ending practice of Female Foeticide. Akal Takhat has issued a Hukamnama that "anyone indulging in unhealthy practice of female foeticide would be excommunicated from Sikh religion. The other religious organizations can also play their effective role besides non-governmental organization (NGOs) (Sunderlal, 2002).

Gender disparity manifests itself in various forms, the most obvious being the trend of continuously declining female ratio in population in the last few decades. Social stereotyping and violence at domestic and societal levels are some of the other manifestations. The underlying causes of gender inequality are related to Psychosocial and Economic structure which is based on informal and formal norms and practices.

Psychosocial and Economical Causes

Harassment at Work Place: The women harassment is a global problem and can be seen everywhere in the society. A woman is considered biologically weak and less in strength at work place. The incidence of rape, women beating and victimization are increasing support the view of men-women inequality.

Insecurity: Because of the insecurity, women is under stress at the time of the birth of her child. The hidden fear of the girl child birth makes her insecure.

Women and Nutrition: The underlying gender inequality forces us to believe that women are not properly nourished. The unfavourable and difference in diet given to females is a significant factor depicting the inequality.

Adjustment Problem: The girls and women in job when get married have to face a problem of job settlement. Continuation of job becomes hurdle in their adjustment and she is now overburdened psychologically.

Fear of Unknown Place: There is a constant fear found in girl that she is to join a new family and this fear in the initial years of marriage creates imbalance in her adjustment.

Quality Education: In India, girls are still considered to be second rate and they are given not equal chance of education. But now the literacy campaigns are trying to equalize and lessen this gap.

Employment: If a female is eligible to get a job, even after getting required education, she will not be given equal chance for employment. This is because of gender inequality.

Multiple Roles: At present women is overburdened with multiplicity of roles. The 'shifting' or 'changing' of roles cause stress and strain on her health.

Role Expectation: There is a positive relationship between role expectation and role playing as far as women are concerned. She has to play different role and the expectations from her will go on increasing one after the other.

Maladapted Family: The psychological stress because of her being overburdened and the varied kind of roles lead her towards maladjustment and thus maladjustment may cause separation, suicide and divorce. When a woman can not bear the burden of bundle of roles she become incapable of making adjustment in home.

After viewing the causes of Men-Women inequality, society still finds that the gap between men-women exists which can be removed through certain objectives formed to bring about the advancement, development and empowerment of women. First

objective is to create an environment through positive economic and social policies for full development of women to enable them to realize their full potential. Women should be given equal access to participation and decision-making in social, political and economic life. She should be given equal rights of health-care and quality education at all levels; career and vocational guidance, employment and equal remuneration etc. A woman should be equally accessible to occupation and public office. Not only rights and facilities are provided, she should be given social and psychological security about her independence. The societal attitude and community practices regarding male-female equal involvement should be changed.

Current social strategy does not favour women to grow and develop normally, various means need to be implemented for women empowerment. Special measures will be taken to eliminate the discrimination such as eradicate illiteracy, universalize education and create a gender-sensitive education and system. The enrolment and retention rates of girls in schools has to be increased. The quality of education to facilitate life long learning and occupation/vocational technical skills of women should be provided.

Women should have access to comprehensive, affordable and quality health care. Special efforts should be made to tackle the problem of deficiencies. Special attention should be given for providing adequate and safe housing accommodation for women including single women and working women to make them secure. A woman in difficult circumstances such as disabled widows, displaced from employment, women who are victim of violence, deserted women should be given special care.

Strict enforcement of laws against prenatal sex selection practices of female foeticide, female infanticide, child marriage, child abuse and child prostitution, removal of discrimination in the treatment of a girl child within the family and projection of a

positive image of the girl child will be actively forced. The image of a woman and girl will be portrayed with human dignity by mass media. Families should value girls as an asset. Gender equality should begin at home and from family. Community should play the role of advocacy to change the mindset of individuals and families to build positive attitude towards the girl child. All these programmes should have common goal and focus to strengthen the position of women and should strive to organize women groups (Sunderlal, 2002).

In India, constitution not only grant equality to women, but also empowers state to adopt measures of positive discrimination in favour of women. From 5th plan onwards there has been marked shift in approach to women's issues from welfare to development. Women development is the key issue for population problem apart from their own health. The employment of women for paid work has raised her status and position in the community apart from generating additional income, which is in the hands of mothers for better food, clothing and care of the child. At last the psychologists and the counselors should play their roles aptly in community as well as in individual settings for women empowerment and women development.

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SECTION II

DEVELOPMENT AND BEHAVIOUR

7

Physical Growth and Adjustment in Adolescent Girls

Sandhya

Adolescence, a period of turmoil, starts with puberty around 13 years and ends at around 18 years, though, its psycho-social chateristics may last longer in many cases. These characteristics are concomitant as well as the by-product of physical changes that occur during this period. Adolescence is ackhowleded to be an universal phenomenon. Though treated of an independent life stage, what are these changes and concomitant psycho-social chacteristics can be discussed now.

Growth among the girl's spurts during the early phase of this period usually between 11 to 13 years with variation from region. There is a change in the body size in terms of height and weight. Nose, feet and hands, though disproportionate in early years of adolescence, attain adult proportions only around 18 years. Sex development starts with menarche (menstruation) and secondary sex characteristics like:

(1) development of breast
(2) wider and rounder hips
(3) pubic hairs
(4) coarser and thicker skin

(5) acne and perspiration in arms pit

(6) shaping of shoulders, arms and legs and

(7) fuller and more melodies voice surface clearly.

She starts noticing changes in her digestive and other Systems of the body as well.

Emotional Changes

Adolescence is treated as 'a period of storm and stress' a time of heightened emotionality and instability etc. Adolescents react fast to social pressures covertly, for which they are not prepared.. Instability results from pressure to adjust to new social expectations from them because of their growth. Excitability, irritability, sometimes explosiveness and tendency to worry and brood up to subside slowly only around 10 to 20 years in a normally developing girl. Poor emotional control is also a characteristic of early Adolescence. Sulking, refusing to speak, shouting, envy etc. may be prominent in their behaviour.

These changes along with intellectual development bring more changes in their social behaviour like giving more weightage to peers opinion, developing prejudices, joining or forming groups, selection of close friends, changes in dress pattern and interest activities, ect.

Now the question arises: how do they adjust to these changes? What are their problems? How can one help them to cope more effectively with these changes? With puberty and sexual maturity, interest in males starts getting intense, of course, with varying degree in individual cases. According to Dion, "a persons physical appearance alongwith his sexual identity is the personal characteristic most obvious and accessible to others in social interactions," For these reasons, the adolescent girls bother about their body and appearance. This concern gets reinforced by todays emphasis on beauty in selection of marriage partners. Author does not have to overemphasis that traditional characteristics of a

good spouse which have been almost replaced by beauty and dowry with the bonus of employedness. It is that the beauty -aids come to the rescue of an adolescent girl. Acne, common in this age are most bothering. Beauty clones, medical treatment news magazines, and beauty Provisions have started penetrating the rural marks only to rob them economically.

The other important and serious concern is menstruation. This, in absence of proper education for sexual changes, cause a lot of embarrassment to the pubescents. Many cases donot know what to do if the flow is scanty or when it reappears or when it is accompanied by cramps, backaches, nausea, breast tenderness ect. Under the influence of peers advice, cheap magazines and ill-informed friendly women, they try all possible methods to solve their these problems which, in many cases, create complications for them. These complications coupled with shyness and social discrimination during menstrual periods (because it is treated as impure period) go only to create physical, economic and psychological problems for her. Many girls react negatively to menstrauation because they are influenced by the negative attitude of others. Negative attitudes may stem from physical discomfort and pre-menstrual tension ect. These are usually traced to stress and strain in the girl lives. About 80% adolescents, according to an estimate, experience menstrual tension, specially in the average population of India though some researcher puts it around 60% in western female population. These tensions will increase or decrease depending upon the socio-educational background of the girl including factors like caste, urbanization and religiosity of the family. The girls who are unprepared for menarche report more severe menstrual symptoms, more negative attitudes about menstruation and are more self-conscious as report more severe menstrual symptoms. Many girls do not know what to use and where to throw the spoiled cloths of menarche. Author's personal observations confirm that many girls are humiliated for these petty mistakes by their neighbours, siblings ect. as women

have certain beliefs about menstruation and cloths (now under brand names) because of which disposal of dirty cloths are to be done in a particular way.

From a study of 250 adolescent girls in Karnal (Haryana) it was observed that 60.4% noticed change in their body. More than 50% (54.4%) were given brief couselling when 45.6% did not receive any information about menstruation from their parents/ family members. Only 50% girls were told about the bodily chandes by their mothers against 50% not receiving it from them .Simlarly 44.2% received informations about menarche ect. from sister/sister-in-law. A 67% girls initially did not like the change in their body, 56.8% girls got anxious and worried about various changes in their body ; 66.4% discussed their bodily changes with their friends .Only 9.6% girls received couselling from teachers about the physical changes in their body.

Any help (counseling, education ect.) to this group of girls need to take care of the following impediments:

Unrealistic self-concepts regarding their appearance and abilities need to be discussed and straightened. Unrealistic self-concept may land them into unrealistic expectations leading to frustration and psychiatric and social problems.

Lack of education about bodily changes may cause frustration, anxiety and depression and poor self-image.

Accepting the changes including defects in ones body and work for (exercise and treatment, intake of proper food ect.) proper development of body to derive satisfaction from it.

Attempts to seek attention from boys or experience sex may land them into social-psychological problems as is observed in this age. U.S.A., by 18 years about 60% girls have had sexual experience which is no problem in that society for its socio-cultural reasons .In India reports of such incidents disqualify a girl for marriage in almost cent percent cases. This reality needs to be heeded to while offering psychosocial services.

Increasing attractiveness may cause more or less permanent damage to body as reported by some during discussion on girls problem. Correct advice ,use of proper material under expert guidance are needed till the emphases on beauty in the society takes back seat.

Need for acceptance and status is so great that any attempt to ignore, belittle or chiding creates explosive situation in the home. Efforts to establish their hege mony, if frustrated leads to aggressive behaviour. Mothers and siblings need to be counselled or told about it. They will have to accommodate their desire to the extent possible. In the personal case, author gave a book on human growth to her children to prepare them psychologically to face their changing body and emotional upheavals. Too much guidance or control is least desirable and may lead to revolt / suicide? homicide in them.

In the end, author will like to say that books on social studies of pre-matric classes must have a lesson on these aspects. National Council of Education and Research Training has made a modest beginning in this direction but it needs to be further strengthened as one can not provide counseling services to everyone though the recent addition of a component on adolescent girls in ICDS may help the adolescent girls to receive education on these aspects also. Electronic media should be motivated to play an effective role by associating relevant information with advertisements for goods consumed by the females.

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8

Factors Affecting Perception of Sexual Harassment: A Review

Shabnam Priyadarshini

Sexual harassment remains a pervasive problem in today's society. However, a universally accepted definition of harassment does not yet exist. This is particularly problematic in cases in which the behavior is ambiguous and open to interpretation. Many ambiguous socio-sexual behaviours occur in day-to-day life that are not intended to be harmful but may be perceived as harassing (Gutek, Cohen, and Konrad, 1990; Williams, Giuffre, and Dellinger, 1999). When viewing sexual harassment as a question of individual perception, many factors can influence how one comes to the conclusion of whether or not behaviour is harassing. There is a need to understand conditions under which ambiguous cues may be perceived as sexually harassing. The present paper is a review to examine the personal and situational factors that influence attribution of responsibility in cases of sexual harassment. Although some recent research has been conducted on sexual harassment of men (Berdahl, Magley, and Waldo, 1996; Stockdale, Berry, Schneider and Cao, 2004), the scope of the purpose of the present review is limited to studies where the victim is a woman and the perpetrator a man.

It is important to understand how different groups of observers judge the same alleged incident of sexual harassment differently. Researchers have explored differences in popular labelling of sexually harassing behaviour (e.g., Baird, Bensko, Bell, Viney, and Woody, 1995; Corr and Jackson, 2001; Fitzgerald and Ormerod, 1990). However, few researchers have examined various people's attributions of responsibility to the victim and the perpetrator (Hartnett, Robinson, and Singh, 1989; Smirles, 1995), and how the amount of information presented about a case of sexual harassment might further influence such an attribution.

Most studies of perceptions of harassment present participants with a perpetrator's initial socio-sexual behaviour and then ask participants to respond to sexual harassment-related measures (Baker, Terpstra, and Larntz, 1990; Blakely, Blakely, and Moorman, 1995; Burgess and Borgida, 1997; Corr and Jackson, 2001; Dougherty, Turban, Olson, Dwyer, and Lapreze, 1996; Gervasio and Ruckdeschel, 1992; Icenogle, Eagle, Ahmad, and Hanks, 2002; Loredo, Reid, and Deaux, 1995; Matsui, Kakuyama, Onglatco, and Ogutu, 1995; McKinney, 1992; Osman, 2007; Soloman and Williams, 1997; Tata, 1993; Terpstra and Baker, 1987; Williams, Brown, Lees-Haley, and Price, 1995). A smaller number of studies concern perceptions of harassment based on the victim's response to the perpetrator's harassing behaviour (Henry and Meltzoff, 1998; Hurt, Maver and Hofmann, 1999; Jones and Remland, 1992; Jones, Remland and Brunner, 1987; Remland and Jones, 1985; York, 1989).

A number of researchers have examined factors influencing the perception of sexual harassment (Baker, Terstra and Larntz, 1990; Collins and Blodget, 1981; Foulis and McCabe, 1997; Gutek, Nakamura, Gahart, Handschumacheer and Russel, 1980; Loredo, 1995; Popovich, Licata, Nokovich, Martell and Zoloty, 1986; Powell, 1983; Powell, Benzinger, Bruno, Gibson, Pfeiffer, and Santopietro, 1981; Reilly, Carpenter, Dull and Bartlett, 1982; Weber-Burdin and Rossi, 1982). One of the most common

variables examined in these studies has been the gender of the respondents. Loredo, Reid and Deaux (1995) identified four factors that affect such perception. These included: the actual behaviour, the target's reaction to that behaviour, the perpetrator's intentions, and the relationship that exists between the two (perpetrator and victim). Some situational and personal factors that affect the perception of sexual harassment, are discussed in the following pages.

Situational Characteristics

Situational characteristics are those associated with the situation in which the behaviour occurs, and include the actual behaviour and the status of the perpetrator relative to the corresponding behaviour and status of the victim.

(a) Behaviour in Question: Behaviours that are considered as sexual harassment by some may not be considered as sexual harassment by others. Williams, Brown, and Lees-Haley (1995) discussed how attribution theory may provide some insight into why behaviours that are seen as harassing by one recipient may not seem so by another. If a potentially harassing behaviour is seen as intentional, stable, and controllable, it is more likely to arouse anger toward the perpetrator and sympathy for the victim; therefore, because the behaviour is seen as offensive, it will more likely be labeled as harassment.

Powell (1983) found that working women differ on what they consider to be sexual harassment. The majority of his sample considered sexual propositions, touching, grabbing, and brushing past as harassment behaviours, but reactions to sexual relations, sexual remarks, and suggestive gestures were mixed. Staring and flirting were not considered by many to be harassment, although they were recognised as incidents of sexual attention. Research has shown that there appears to be a relationship between the severity of harassment and labelling behaviour as sexual

harassment (Barak, Fisher and Houston, 1992; Ellis, Barak and Pinto, 1991; Fitzgerald, Shullman, Bailey, Richards, Swecker, Gold, Ormerod and Weitzman, 1988; Giuffre and Williams, 1994; Gruber and Smith, 1995). Pryor and Day (1988) observed that certain behaviours because of their extreme nature (for example, a professor's demand for sexual favour under the explicit threat that, if refused, academic grade would be adversely affected) are considered sexual harassment by most people (Reilly, Carpenter, Dull and Bartlettm 1982; Weber-Burdin and Rossi, 1982). Other more ambiguous behaviours (for example, a positive verbal comment about a student's physical appearance), are interpreted to be sexually harassing by some people and not by others (Gutek, Nakamura, Gahart, Handschumacheer and Russel, 1980). Loredo, Reid and Deaux (1995) have also observed that the differences in the perception of sexual harassment are more marked at lower levels of harassment (e.g., gender harassment, seductive behaviour).

Terpstra and Baker (1987) obtained significant differences between the perception of working women and female students with respect to four social-sexual behaviours (sexual proposition, unwanted physical contact, off-colour jokes, and graffiti). The results obtained might be a function of differing degrees of familiarity with sexual harassment. Working women might have experienced more instances of sexual harassment and, as a result, might have become more sensitised and less tolerant of such behaviour. Moreover, college is viewed by some youth as an opportunity for increased socialisation and interaction with the opposite sex, and therefore the attitudes and norms regarding social-sexual behaviours held by college students may be some what different than those held by working women. As people grow older, they come in contact with more and more instances of harassing behaviour and also experience the negative outcomes of such behaviours. Their perceptions may then change (Konrad and Gutek, 1986).

Generally, perceptions of harassment are weaker when harassing behaviours are more ambiguous and less severe (Burgess and Borgida, 1997; Ellis, Barak and Pinto, 1991; Jones and Remland, 1992; Terpstra and Baker, 1987; Williams, Brown, Lees-Haley and Price, 1995). This seems logical, given that ambiguous situations are more vulnerable to interpretation than are more obvious and severe incidents of sexual harassment. Research conducted in university and workplace settings indicates high levels of agreement regarding the sexually harassing nature of intrusive forms of behaviours in which physical coercion or assaults are involved, but disagreement as to the sexually harassing nature of less severe behaviours (e.g., sexist remarks, jokes, seductive behaviour) are common (Fitzgerald and Ormerod, 1991; Ivy and Hamlet, 1996; Reilly, Lott, and Gallogly, 1986). Loredo, Reid, and Deaux (1995) have found that perceptions of sexual harassment among adolescents likewise vary as a function of the physical intrusiveness of the behaviour. Behaviours that involved high levels of intrusion (i.e., sexual coercion) are perceived as more sexually harassing than behaviours that involved a lower levels (*i.e.,* seductive behaviour, gender harassment). Despite the potential for these less intrusive behaviours to contribute to a hostile environment, they are less likely to be regarded as sexual harassment.

Consistent with the results of previous research (Burgess and Borgida, 1997; Fitzgerald and Ormerod, 1991; Hand and Sanchez, 2000; Ivy and Hamlet, 1996; Johnson, Benson, Teasdale, Simmons and Reed, 1997; Loredo, Reid and Deaux, 1995; Osman, 2004; Terrance, Logan and Peters, 2004; Williams, Brown, Lees-Haley and Price, 1995), Osman (2007) in her study has found that behaviour that involves physical contact is more readily labeled as sexually harassing than are the less intrusive verbal/ visual and derogatory forms of harassment.

One dimension on which the severity of the perpetrator's behaviour has been defined involves whether or not the unwanted

attention is physical or verbal in nature. Overall, physical attention has been perceived as more severe. However, differences in perceptions are greater when the attention is verbal (Burgess and Borgida, 1997; Benson, Teasdale, Simmons and Reed, 1997; Osman, 2004, 2007; Williams, Brown, Lees-Haley and Price, 1995).

Osman (2007) found two situational factors involving perpetrator behaviour that influenced perceptions of harassment in the face of victim resistance were severity and continuation of sexual attention. Less severe harassing behaviour may be a situational factor that leads individuals to perceive that a victim who says "stop" may not really mean it. On the other hand, when a perpetrator's behaviour is on the more extreme end of the severity continuum, the very nature of that behaviour may itself cue individuals to understand that "stop" means "stop" (Osman, 2004). Continuation of sexual attention following resistance by victim results in stronger perceptions of sexual harassment than discontinued behaviour does.

(b) Status of the perpetrator: Another objective variable that influences whether respondents will label behaviour as harassment is the status of the harasser. Offensive behaviours exhibited by a superior are more likely to be perceived as sexual harassment than the same behaviours exhibited by a co-worker (Collins and Blodgett, 1981; Giuffre and Williams, 1994; Gutek, Morasch and Cohen, 1983; Popovich, Licata, Nokovich, Martell and Zoloty, 1986; Reilly, Carpenter, Dull and Bartlett, 1982; Thacker and Gohmann, 1996;). Collins and Blodgett (1981) showed that harassment behaviours on the part of a supervisor are considered to be more serious than the same behaviours on the part of a co-worker. Popovich, Licata, Nokovich, Martell and Zoloty (1986), too, reported that status of the harasser is a factor in determining the degree to which the behaviour is considered to be sexual harassment. Their study revealed that participants considered the

same behaviours as more definitely sexual harassment when attributed to a supervisor, as opposed to a co-worker. Rotundo, Nguyen and Sackett (2001) in a meta analytic study found evidence suggesting that behaviours are more likely to be perceived as harassing by both sexes if they are engaged in by someone who has higher status or formal authority over the victim. Pryor (1985) found that the social-sexual behaviours of a professor directed towards a student were viewed as more unexpected and more harassing than the same behaviours of a student directed toward a student. Findings by Pryor and Day (1988) replicated the results reported in Pryor (1985).

The results of a study by DeSouza and Fansler (2003) also indicated that a harassing behaviour from a superior was perceived by respondents, both males and females, as more bothersome than one from a peer or subordinate.

Katz, Hannon, and Whitten (1996) in a study made 197 college students rate 20 hypothetical interactions varying the power differential between the harasser and victim. They found that the more egalitarian the relationship between the harasser and the victim, the less likely participants were to perceive the behaviour as sexually harassing.

However, Loredo *et al.* (1995) have observed that when an incident depicts higher levels of harassment, such as sexual bribery, sexual coercion, or sexual assault, respondents are less likely to discriminate on the basis of harasser status. This finding is similar to that by some other investigators, for instance, Tata (1993), who found that undergraduate students were more likely to label an action as harassment when the harassed was a superordinate than when he was a peer or subordinate. This difference was particularly evident at lower levels of harassment (i.e., gender harassment, seductive behaviour). At higher levels of harassment, respondents were not influenced by the status of the harasser. Similarly, Bursik (1992) noted that college students' perceptions

of sexual harassment were influenced by power differences between the harasser and the individual being harassed. Power inequality was particularly influential when the behaviours involved were more ambiguous.

Some research has indicated that the marital status of the harasser may also contribute to the perception of sexual harassment (Pryor, 1985). A married person's harassing behaviour towards a victim is perceived as more of a role violation and more harassing than the same behaviour from a single person (Jones, Davis and Gergen, 1961).

Thus, all these studies suggest that characteristics of the harasser influence perception of incidents of sexual harassment. Harassers who have institutionalised power over their victims for not complying with their demands can punish them. Harassers who do not have such institutional power do not pose the same threat. For these reasons, harassment by high status persona is seen as more damaging and as less appropriate.

Individual Characteristics

People's judgments are often not based solely on the objective details of the situation. Two people could witness the same incident, yet have completely different interpretations of what occurred. Because of such biases in perception, a number of researchers have investigated what personal qualities of the participants (e.g., gender, attitudes) might affect their attributions of responsibility (Bean, Stires, Keller, and Schenck, 1995; Malovich and Stake, 1990).

(a) Gender of the participant: Gender differences are one factor that impacts perceptions of friendly behaviour and harassment. Girls experience harassment more often, and they experience more severe, physically intrusive and intimidating forms of harassment than do boys (Hand and Sanchez, 2000; Loredo, Reid and Deaux, 1995; Roscoe, Strouse and Goodwin,

1994; Runtz and O'Donnell, 2003; Smirles, 2004; Timmerman, 2003). Further, girls exhibit more pronounced reactions to harassment and have more negative outcomes as a result of experiencing harassment (AAUW, 1993, 2001; Larkin, 1994). Consistent with this, in previous studies, adolescent girls were more likely, irrespective of the ambiguity of the behaviour, to perceive sexually harassing behaviours as more severe (Hand and Sanchez, 2000; Loredo, Reid and Deaux, 1995). In light of girls' differential experience, it is likely that they would be more likely to define a wider variety of behaviours as sexually harassing than boys would.

Results from a number of studies suggest that men impute more sexual meaning to heterosexual interactions than do women (Abbey, 1982, 1991; Major and Heslin, 1982; Shotland, 1989, 1992). Women and men may interpret the same cues differently. An action intended by a woman as a sign of platonic friendliness may be perceived by a man as a sign of sexual interest. These results of a study by Abbey (1982) have indicated that men are more likely to perceive the world in sexual terms and to make sexual judgments. Males seem to perceive friendliness from females as seduction. In general, it has been found that men are more likely than women to attribute greater sexual desire to women and to perceive women as trying to behave in a sexy manner during friendly interactions (Osman, 2004, 2007).

Research has indicated that women tend to be less tolerant than men of sexual harassment (Russell and Trigg, 2004). Women report harassment more often than men do, and women perceive a broader range of behaviours that comprise unacceptable social-sexual behaviour (Jones and Remland, 1992; Pryor, 1987; Rotundo *et al.*, 2001; Wiener and Hurt, 2000). Women are more likely than men to perceive sexual touching as a threat, whereas men may be likely to view sexual contact as a compliment (Gutek, 1985). Osman (2007) has found in her study that overall, women have stronger perceptions of harassment than men do. Men are

also more likely to attribute blame to victims regardless of gender (Rubin and Borgers, 1990).

Personal perceptions about what constitutes sexual harassment could influence attribution of responsibility. The few researchers who have assessed attributions in sexual harassment have found that males hold the victim more responsible and the perpetrator less responsible than do females (Bean, Stires, Keller and Schenck, 1995; Kenig and Ryan, 1986; Smirles, 1995). This is consistent with rape attribution research (Lamb, 1996; Langley, Yost, O'Neal, Taylor, Frankel and Craig, 1991). In a study by Smirles (2004), it was found that male participants held the victim more responsible and the perpetrator less responsible than did female participants, regardless of the gender of the victim or the perpetrator.

Gender differences of perception appear to narrow when sexual behaviours are toward the extreme ends of the harassment continuum (Russell and Trigg, 2004). Studies suggest that men and women concur most often when harassing behaviours are considered extreme (Gutek and O'Conner, 1995). At the other end, men and women tend to agree about quid pro quo situations, about behaviours that are so benign that they are not considered harassment, and about when the perpretrator is a man of higher status or formal authority over the woman harassee (Bursik, 1992; Cleveland and Kerst, 1993; Gutek and O'Connor, 1995). However, perceptions of ambiguous behaviours (e.g., uninvited attention, sexual comments) continue to show gender differences (Wiener and Hurt, 2000). In a study by Runtz and O'Donnell (2003), women and men showed the greatest disagreement on the most ambiguous items, and they were in greatest agreement on the single item that was the least ambiguous statement of sexual harassment. While men and women are generally in agreement regarding blatant quid pro quo behaviours, it is in the more subtle situations of sexual inappropriateness where their different perspectives are most apparent. That is, when there is greater room for personal judgments to be made, men are much less

willing to identify sexualized behaviour as being sexual harassment.

The Gender Study Group (1996) of Delhi University, in its survey, found that a few males considered sexual harassment to be a serious issue. According to some males in the sample, sexual harassment is a problem only when physical abuse is involved, but for females even lecherous glances, lewd remarks, and catcalls are demeaning and humiliating, and affect their academic and personal development.

The phenomenon of eve teasing as perceived by boys and girls was compared by Mohan and Priyadarshini (1995). It was found that though there was considerable commonalty in the perception of different types of eve teasing by boys and girls, the degree of harassment in most cases was reported higher by girls. Significant differences were found in attribution of various causes of eve teasing by boys and girls (Mohan and Priyadarshini, 1996). It was concluded that the boys tended to blame girls for provoking this behaviour, while the girls blamed boys for showing superiority or power over girls.

Overall, women perceive sexually harassing behaviours as more threatening, inappropriate, and bothersome than men do (Cochran, Frazier, and Olson, 1997; DeSouza and Fansler, 2003; Fitzgerald, and Ormerod, 1991; McKinney, 1992).

(b) Gender-based Attitudes of participants: Findings related to gender differences may in part arise because of norms regarding appropriate gender role behaviours (Tata, 1993). With regard to social-sexual interactions, traditional gender norms dictate that men are the sexual aggressors, and women are the complacent recipients (Fitzgerald, 1993; Laws and Schwartz, 1977). It follows from this then that individuals who endorse traditional gender role attitudes would be less likely to deem behaviours as sexually harassing than would individuals with nontraditional attitudes. Consistent with this, Malovich and Stake (1990) found that the

traditional college students in their study were more tolerant, and the liberal students less tolerant, of harassment behaviour.

Previous research has found that the gender-role attitudes of people influence their perceptions of sexual harassment (e.g., Brooks and Perot, 1991; Foulis and McCabe, 1997; Gutek and Morasch, 1982; Tangri and Hayes, 1997). Because women are usually the victims of sexual harassment and rape, it is possible that people's attitudes toward women influence their attributions of responsibility to the victim and perpetrator. Malovich and Stake (1990) utilized the short form of the *Attitudes Toward Women Scale* (Spence, Helmreich, and Stapp, 1973) to classify participants as having traditional (i.e., conservative) or non-traditional (i.e., profeminist) attitudes toward gender roles. They found that non-traditional participants attributed less responsibility to the victim of sexual harassment than did traditional participants. Gender-role attitudes, as defined specifically by individuals' perceptions of women, appear to have significant influence on attributions of responsibility in a case of sexual harassment.

Terrance, Logan and Peters (2004) investigated individual characteristics of gender, gender role attitudes and self esteem in terms of their potential impact on perceptions of sexually harassing behaviours. As expected, when the behaviour clearly constituted harassment, namely the physical form, individual difference variables did not moderate these perceptions. However, as the behaviours became less severe, these variables had an increasingly stronger impact.

Smirles (2004) in her study found that traditional participants held the victim more responsible and the perpetrator less responsible than did participants with non-traditional gender-role attitudes. This is consistent with theories suggesting that people's gender roles can affect their judgments and even perceptions of their own experiences (e.g., Brooks and Perot, 1991; Foulis and McCabe, 1997; Gutek and Morasch, 1982; Pryor, 1985; Tangri and Hayes, 1997).

(c) Victim's characteristics: Some research has also been done to probe the effect of attractiveness of the victim on the perception of sexual harassment. Appearance cues are likely to bias perceptions of those involved in ambiguous sexual harassment incidents. Physical attractiveness is one cue that has been found to strongly influence impressions of others.

Pryor and Day (1988) in their study varied the attractiveness of the target using pre-scaled photographs of attractive, average, and unattractive women. They found that remarks made to an attractive woman were interpreted as no less harassing than those made to an average looking woman. However, remarks on physical appearance made to both attractive and average women were rated as more harassing than such remarks made to an unattractive woman. This pattern of results seems to reflect the assumption on the part of the subjects that sexual harassment is motivated by sexual interest. Quinn and Lees (1984) have reported that the authorities often regard complaints of sexual harassment by unattractive women as incredulous. Golden, Johnson and Lopez (2001) have found that physically attractive victims (all of them women) are more likely to be labelled as harassed than are unattractive victims. An interesting finding in a study by Madera, Podratz, King and Hebl (2007) is that the tendency to believe and like female complainants, more than male complainants, is stronger when complainants are physically attractive. Apparently, physical attractiveness activates a "what is beautiful is good" stereotype (Dion, Berscheid, and Walster, 1972; Eagly, Ashmore, Makhijani, and Longo, 1991; Feingold, 1992).

Some victim characteristics may satisfy what Kelly (1973) calls a 'multiple sufficient causal schema' in the attribution of sexual harassment. For example, if a target dresses in a particularly seductive manner, the target may be seen as having provoked sexual behaviour from the perpetrator. In such a case, the target's characteristics may often be said to provide a sufficient explanation

for the behaviour, and no specific negative intentions or sexual harassment from the perpetrator may be inferred. Pryor and Day (1988) also argued that the way a woman dresses up or uses makeup may serve as a basis of inferring her sexual intentions. If she tends to provoke sexual interest, then a male's social-sexual behaviour may be viewed as less sexually harassing even in situations where there are obvious power differences and a potential for sexual harassment.

Clothing of the victim is an issue from which gender stereotypical interpretations emerge. Types of clothing, degrees of fit and particular fashions can be thought of as "texts" which may be "read" in gender-specific ways (Freitas, Kaiser, Chandler, Hall, Kim and Hammidi, 1994), and these interpretations may extend to sexual interest (Haworth-Hoeppner, 1998). Males are likely to judge some clothing as indicative of sexual interest, while their female counterparts do not make a parallel inference.

The general attitude that the woman's place is in the home is to a large extent responsible for the sexual harassment of women by men. Non-traditional women and non-conforming women have been seen by men as fair game and have been particularly subject to sexual harassment (Mead, 1978). Culturally shared social images of women are linked with sexual harassment. People have no single image of "woman" in the society, but a cluster of images or subtypes (Deaux, 1995), with distinctively different stereotypic content. The many subtypes of women form three distinct clusters - "sexy", "non-traditional", and "traditional" (Six and Eckes, 1991). "Sexy" women are characterised as being concerned with their own appearance, often desirous of attracting men. "Non-traditional" women are viewed as demanding, ambitious, independent, and intelligent. "Traditional women are perceived as conforming, dependent, passive, uncritical, and stupid. These clusters are decisive for the man to behave towards each type.

According to Fiske and Glick (1995), women who are perceived as falling into the first two categories may, for completely different reasons, be the most likely to be harassed, whereas women who are classified as traditional may be more likely to receive male protection rather than sexual advances. The same behaviour would be perceived as harassing if the victim falls under the "traditional" category and as normal if the victim falls under the "sexy" or "non-traditional" categories.

Traditional gender role stereotypes convey a double standard regarding alcohol consumption too - drinking men tend to be viewed more positively than drinking women (Crowe and George, 1989; Richardson and Campbell, 1982). Women who drink alcohol are often perceived as being sexually promiscuous (Corcoran and Thomas, 1991; George, Gopirnic and McAffee, 1988). Women who visit such places as pubs and discos are seen by men as "being available", "asking for it" and "bad" (Russell, 1984). Thus, a woman may not be believed if she reports that she was harassed during a visit to a pub.

(d) Victim's reaction: Women generally do not stand idly by and let themselves be harassed. Rather, they do whatever is possible to evade the harasser, to divert his energies, or to confront him; in short, they resist. Targets of sexual harassment use numerous tactics to manage their experiences. Thus, not only are there differences on how victims manage their situation, they typically endorse more than one response option. Women do not automatically respond assertively to those who are behaving offensively toward them; rather, they avoid and ignore their offender and the situation as much as possible.

Fitzgerald and her colleagues (Fitzgerald, 1990; Fitzgerald, Swan and Fischer, 1995) identified parallel categories for responding to sexual harassment through focus group data. *External* strategies are designed to manage the situation itself and include such behaviours as avoidance, appeasement (evading the

harasser in a non-confrontational manner, as, for instance, by using humour or making an excuse), and seeking the support and assistance of others as well as the more widely recognized strategies of assertion and reporting. *Internal* (emotion-focused) strategies, on the other hand, address the affect and cognitions associated with the situation and include endurance (e.g., ignoring the behaviour), denial, detachment (e.g., minimizing the situation), relabeling, and illusory control (i.e., self-blame).

Research indicates that both verbal and non-verbal behaviours on the part of the victims may influence perceptions of harassment. It has been shown that responding consistently with both verbal and non-verbal negative or resistant messages yields stronger perceptions of sexual harassment than both verbal and non-verbal positive or encouraging responses (Jones and Remland, 1992; Jones, Remland, and Brunner, 1987; Osman, 2004; Remland and Jones, 1985; Williams and Cyr, 1992). These studies indicate that as long as some type of resistance is present (verbal or non-verbal), harassment is likely to be perceived. In their study on the perception of sexual harassment, Kanekar and Dhir (1993) have reported that the victim is blamed more if she ignores the behaviour than when she does report the matter to the appropriate authority.

Henry and Meltzoff (1998) found that saying "stop" assertively to a co-worker was associated with greater perceptions of sexual harassment and perceptions that the harasser's behaviours were unwelcome by the victim. In examining harassment between students, Hunter and McClelland (1991) found that even politely saying "please stop" increased ratings of the seriousness of the offence. The results of these two studies suggest that saying "stop" may be a good strategy to identify sexually harassing behaviour. However, it is important to determine whether there are conditions under which saying "stop" may not be perceived as "stop". This may be especially important when verbal resistance is offered with friendly non-verbal cues.

Hartnett, Robinson and Singh (1989) have found that someone who acquiesces to sexual harassment is seen in a less favourable light (i.e., less attractive, more manipulative, more sexually inadequate) than is the perpetrator. A victim is often seen as more responsible for precipitating the perpetrator's actions (e.g., dressing seductively; Lamb, 1996). However, her reaction after the fact has nothing to do with the perpetrator's original actions. It is intriguing but puzzling that observers tend to focus on the victim when judging the behaviour of the perpetrator. Fitzgerald, Swann, and Fischer (1995) and Lamb (1996) have argued that sexual harassment will continue as long as the victim's behaviour is disproportionately blamed for the situation. Therefore, it is critical that researchers examine how a victim's reaction can affect people's attributions of responsibility.

Smirles (2004) have found all participants in her study, but particularly females, hold the victim more responsible when he or she acquiesce to the perpetrator's demands than when he or she resists. Her findings also suggest that female participants make finer distinctions of responsibility to the victim than male participants do. Female participants apparently utilized the information about the victim's reaction to make decisions concerning responsibility. However, males might have ended their analysis of responsibility with the decision of whether the situation involved sexual harassment.

Myers-Levy and Sternthal (1991) and Tannen (1990) argued that women tend to rely more heavily on details and message cues than do men. Thus, whether due to one's biological sex ("nature") or social experiences ("nurture"), women and men have different decision-making processes.

In sexual harassment situations, although a woman may offer verbal resistance to a man's sexual attention, her positive and negative non-verbal cues may influence perceptions of whether or not she really wants the attention. Independent of contextual

factors, some individuals are predisposed to believe that women use token resistance to a man's sexual attention (Osman, 1998, 2003; Osman and Davis, 1997).

Loredo, Reid and Deaux (1995) found that many of the students in their study used the victim's reaction to the behaviour as a crucial factor for judgements of harassment. Harassment was said to have occurred if the victim was put in an uncomfortable situation, if he or she was embarrassed, felt ashamed, or was subject to an invasion of privacy. Some terms of endearment and questionable compliments even by someone close, if made in public, can make individuals feel uncomfortable or worse. In other words, harassment occurs whenever a person does not wish to be subjected to some behaviour.

CONCLUSIONS

It is realistic to assume that women may try to protect their workplace relationships by offering friendly passive resistance to unwanted sexual attention. However, men are likely to perceive friendly behaviour as sexual interest. Therefore, a man may think that a woman really wants sexual attention, even when she says "stop," as long as her non-verbal behaviour is friendly. This is consistent with the idea that, given certain situations, women may be perceived as employing token resistance to sexual attention.

People tend to infer certain pieces of information in order to make sense of a situation, possibly drawing upon personal attitudes, beliefs, or experiences. It appears that participants' gender-role attitudes have a differential effect on their different attributions of responsibility, suggesting that non-traditional participants have less tolerance for sexual harassment than do traditional participants. However, such findings further support the notion that gender socialization, not just biological gender, can explain differences in attributions of responsibility in cases

of sexual harassment. The fact that males and females, and traditional and non-traditional, people typically make different judgments about sexual harassment suggests that the genders have different gender socialization experiences, rather than that men and women are "born different." Perhaps the differences are so marked between men and women because very few people are truly able to gain the perspective or the experience of what it is like to be a member of the opposite gender. Until gender barriers are crossed, men and women will continue to have distinctly different perspectives. Unfortunately, these differences will most likely end up being attributed to one's sex, rather than as effects of socialization (i.e., "gender").

There are some serious implications of the present review. First, personal factors tend to influence judgments at times of ambiguity. One then should be warned to always present people with as much information about the situation as possible. Second, females' finer distinctions on victim responsibility seem to suggest broader implications for cases of sexual harassment (e.g., the reasonable woman standard). Whether women focus more on details than do men either only in situations that are relevant to them as a group or across contexts as a result of some broader socialization process, this difference could present a serious bias to decision-making situations (e.g., jury, job evaluation) and should be investigated more thoroughly.

Sexual harassment is not only difficult to define behaviourally, but it is apparent from the present review that numerous personal and situational factors can affect people's judgments of an alleged case (also see Pryor, LaVite, and Stoller, 1993). Societal perceptions of sexual harassment create a climate that can either condemn or condone such behaviour (Pryor, Giedd, and Williams, 1995; Pryor, LaVite and Stoller, 1993). Therefore, one major step toward eliminating sexual harassment is to examine people's attitudes and decision processes around such behaviour.

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9

Psychoprophylactic Intervention for the Management of Labour Pain

V.D. Swaminathan

Most women feel pain during labour and delivery, but the degree of painful sensations varies widely. Many women feel strongest pain, especially during the first two stages of labour. The desire to relieve or remove painful sensations appeared among Obstetricians of ancient times, but it was only during the first half of the 19th century that scientifically grounded methods to relieve pain were developed with the discovery of the anaesthetizing effect of ether and other substances. Ether was first used in obstetrical practice by N.I. Pirogov for application of forceps (1847) and by J. Simpson for the rotation of the foetus (1847). Ether and chloroform were later used for pain relief in labour.

Along with the wide incorporation of pain relief methods into obstetrical practice an intense research of new effective methods of anaesthesia is being carried out. Psycho-prophylactic method of preparing the pregnant for labour developed by Velvovsky (1960), is now widely used (Swaminathan, 2006). The method is based on the study of causes of labour pain. The objective of psychoprophylaxis is to remove pain by the action on the central nervous system of the woman.

The nerve endings (interoceptors), nerve fibers and plexus of the uterus and other parts of the birth canal are excited during labour. The uterine interoceptors are excited due to contractions of the uterine muscles and distension of the lower uterine segment and the cervix. The painful sensations mainly depend on the excitation of the nerve endings in the dilating cervix. As the head of the foetus descends, it excites the nerve plexus in the pericervical region : the distension of the uterine and peritoneal ligaments and the compression of the blood vessels whose walls are innervated with highly sensitive nerve elements, also provoke pain. An additional source of pain during the second stage of labour is the excitation of nerve elements in the perineum and external genitalia.

The excitation of the uterine nerves is transmitted through the nerve trunks to the central nervous system and the pain is reflected in the lower abdomen, the sacro lumbar region, in the groins and the upper parts of the thighs.

Emotional upsets, the convication that labour pain is inevitable, the anticipation and fear of pain, the fear of labour outcome and of her future baby, etc., are certain psychogenic components of labour pain (Kannamma and Swaminathan, 1990). These emotions inhibit the cerebral cortex and interfere with normal relationship between the cortex and lower parts of the central nervous system. As a result of summation of all these components, the excitation of the nerve endings in the uterus is perceived by the woman as very strong pain.

The nerve elements of the uterus and other parts of the reproductive system are always excited during labour, but painfulness of the subjective feelings, is different in women and depends on the functional characteristics of the nervous system.

Clinical observations show that labour in some women is associated with little pain or is painless altogether. Many women experience moderate pain and withstand it with patience and

without fear. Their behaviour is readily controlled by the medical personnel. This reaction to pain usually occurs in even-tempered women with balanced nervous system (Kannamma and Swaminathan, 1990).

Women with unstable personality are susceptible to attacks of fear and other adverse emotions. The pain threshold is low in them and excitation of nervous elements associated with uterine and abdominal contractions is sensed as strong pain by them. Such parturients are restless, their behaviour is difficult to control and this interferes with normal conduct of labour. Hence the response of the parturient to excitation of the nervous system of the reproductive tract by equal stimuli may be different. The feeling of pain depends on the features of activity of the higher regions of the central nervous system, the cerebral cortex.

Subjective perception of labour pain and the behaviour of the parturient have been studied by a few investigators (Sowndaram and Swaminathan, 1989; Kannamma and Swaminathan, 1990) and they have tried to remove pain by strengthening the emotionality dimension of the woman during pregnancy. The woman must be informed that her labour may be painless provided she totally abides by the instructions of the obstetrician. During psychoprophylactic treatment the woman is taught how to behave correctly during labour. She is given the necessary information concerning physiology of labour and its clinical course. She is also made to realize the feelings that she may experience in various stages of labour with a special emphasis on the fact that pain is not inevitable.

Psychoprophylaxis is a system of measures that should be undertaken from the very beginning of pregnancy and especially four weeks preceding labour as well as during labour.

During pregnancy the woman is given a thorough examination (both on general and obstetric aspects). The obstetrician or health psychologist specialized in obstetrics gets to know the attitude of

the expectant mother to (i) pregnancy, (ii) labour and delivery. The specialist tries to remove fear of labour and to persuade the expectant mother to think that her labour will be painless and successful. The personality of the pregnant woman should be steadily and favourably acted upon during each prenatal visit to the maternity clinic.

Beginning with the thirty fifth or thirty sixth week of pregnancy, the pregnant woman should be given the necessary information about the nearing labour and be taught how to behave during labour so that it may be accomplished without pain.

A special room should be available for the purpose. It must be equipped with all visual aids that might be necessary. If this is not possible, the pregnant woman can be taught in an ordinary room.

Normally four lessons (four or five weeks before labour) would be enough for successful preparation of the patient for labour provided all requirements of such lessons are met such as

(*i*) undue fears are removed and

(*ii*) the pregnant woman becomes convicted in successful outcome of labour.

Gist of each of the four lessons, is presented below.

First Lesson

The pregnant woman is acquainted with the anatomy of the female genitalia and the changes that occur in her body. Labour and delivery are described as a normal physiological process. Three stages of labour are described (1) characteristics of the first stage of labour, (2) subjective feelings of the parturient, (3) uterine contractions - their length and frequency, (4) changes occurring in the female genitalia during the first stage of labour, (5) their physiological character (dilation of the cervix), (6) the role of the membranes and the amniotic fluid are explained.

Attention is drawn to the fact that the parturient spends much energy during labour and that the woman should spare her efforts for the main stage of labour marking expulsion of the foetus. She should assume a comfortable position, take food regularly and follow all instructions of the medical personnel.

Second Lesson

The woman is instructed how to behave during regular contractions and during the entire first stage of labour. The pregnant woman is trained physically to perform exercises which promote normal course of labour and reduce painful sensations.

(1) Lying quiet

(2) Deep and rhythmic breathing during uterine contractions.

(3) Inhalation and exhalation with simultaneously rubbing the lower part of the abdomen by finger tips of both hands form the median line over the pubis lateral ward and upward.

(4) Rubbing the skin of the sacrolumbar region simultaneously with regular breathing.

(5) Pressing the skin to the inner surface of the iliac crests at both anterior superior spines and the outer angles of the Michealis rhomboid. The skin at the anterior superior spines is pressed by the tips of the thumbs, the palms at the thighs, while at the anterior angles of the Michaelis rhomboid, by the clenched fists put beneath the rhomboid.

(6) Counting uterine contractions.

(7) Resting in the pauses between contractions and dozing if possible.

The exercises should be well mastered by the pregnant woman and performed in the order suggested by the obstetrician.

At the end of the lesson, the pregnant woman is made aware of the causes that may intensify pain during labour (undue fears, restlessness, full bladder etc.). The pregnant woman is explained that these causes of pain may be timely and fully removed by correct behaviour during labour.

Third Lesson

The pregnant woman gets information regarding.

(*a*) second and third stages of labour

(*b*) subjective feelings of the parturient woman during this period.

(*c*) recommended positions at the beginning and end of the expulsive period of labour.

The pregnant woman is taught how to hold her breath during abdominal contractions. She is explained that in order to intensify the efficiency of abdominal contractions, it is necessary to hold breath for 10-15 seconds after taking a deep breath. This intensifies the muscular tension. The procedure should be repeated twice or three times during each contraction. The pregnant woman is taught how to breathe and relax her muscles in order to reduce the expulsive effort during disengagement of the head. The placental stage, its duration and the character of contractions during this stage are then described.

Fourth Lesson

In this lesson, all the previous material is revised in short and the knowledge acquired by the pregnant woman in the first three lessons is checked.

Four lessons will be sufficient provided the pregnant woman has been given psychoprophylaxis during earlier prenatal visits to the maternity clinic. Otherwise five or six lessons are required to be taught. In order to complete the prenatal training of the pregnant woman she is recommended to repeat the exercises at

home on her own. The woman is informed about the regulations of the hospital where she is going to have her delivery. She is also informed of the manipulations that may be performed on her during labour such as

(*i*) external and vaginal examinations,

(*ii*) intravenous administrations of glucose,

(*iii*) breathing with oxygen etc. The pregnant woman is clearly instructed that she should follow instructions of the medical personnel. The necessity of taking food regularly is explained as well.

During visits of the health psychologist or any other member of the obstetric team, to the pregnant woman's home, there can be a discussion on the information which the pregnant woman has acquired earlier during her visits to the maternity clinic.

The efficiency of psychoprophylaxis depends largely on the organization of the health education at a given hospital and the skill of the personnel. Their attitude to the pregnant woman should be quiet and benevolent. The personnel is prohibited to discuss possible complications of labour in the presence of parturient women. Inadequate behaviour of the medical personnel inconsiderate conversations, lack of care in their attitude to the parturient will reduce the effect of psychoprophylatic preparation of the woman for her labour.

The obstétrician conducting labour takes a constant watch on the parturient, encourages her, reminds her of the methods how to lessen and remove labour pain and tries to convince her that the outcome of labour will be successful. All the examinations of the parturient, the conduct of labour and other manipulations should be done calmly without undue fuss.

At the end of labour, the obstetrician evaluates the efficacy of psychoprophylaxis by taking into account.

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10

Natural Management of Premenstrual Syndrome

Richa Shri

The development of living organisms passes through many stages. Puberty in human beings is marked by many stresses, fears and apprehensions. In the life of a woman there is an additional trauma i.e., *menarche* or beginning of menstruation. This phase marks the beginning of the process by which the uterus, or womb, prepares itself for pregnancy. Each month the lining of the uterus, called the endometrium, is shed from the body, producing a period, and a new lining is grown to replace it. The typical features of menstrual cycle are shown in table 1. This landmark developmental change is accompanied by behavioral and personality changes which interfere with emotional, mental, social and professional well being of women (Mohan and Aparajita, 2002).

Menstrual Problems

There are a number of problems associated with menstruation. Menstrual problems have become very common, due to faulty living style, unhealthy eating habits, Polycystic Ovarian Syndrome, dietary change with sudden gain or loss of weight, hormonal imbalances and stressful work schedules. Some of these problems include:

(1) the conduct of the woman during labour and
(2) the report of the parturient on her subjective condition and sensations.

The efficacy of psychoprophylaxis is thus assessed in the following terms:

(1) complete effect
(2) partial effect and
(3) no effect.

If a pregnant woman has not received any instruction during her prenatal visits she should be prepared for labour on admission to the hospital. The preparation is done by relieving fear from the mind of the pregnant woman and assuring successful outcome of labour. The efficiency of pre labour talks is much lower than prolonged psychoprophylactic treatment (Sowndaram and Swaminathan, 1989). If the pregnant woman is not psychologically prepared, she is quite likely to feel pain during labour. Most women experience and express pain during labour and delivery; but the degree of experience and expression of pain varies widely. Many women feel strongest pain especially in the first and second stages of labour (Kannamma and Swaminathan, 1990).

Dr. John Bonica's significant contributions to the management of acute and chronic pain in a strong conceptual frame work, are well known among health professionals throughout the world. He developed a keen interest in obstetrical anaesthesia quite early in his professional career after his wife encountered a near-disastrous experience because of improper administration of ether anaesthesia when their first child was born. After twenty years of experience in the field of obstetrical anaesthesia, he wrote two volumes of books entitled, "Principles and Practice of Obstetric Analgesia and Anaesthesia. In this modern medical classic work, he has addressed every aspect of childbirth with thoughtfulness and deep insight (Bonica, 1967; 1969).

Bonica (1969) has consistently argued that labour is often extremely painful and severe prolonged pain can do considerable harm to women with cardiovascular problems and also to the foetus. Oxygen supply to the foetus may get affected adversely if delivery happens to be complicated.

A study by Melzack, Kinich, Doblin, Leuburn and Teanzer (1984) supports Bonica's contention that many women suffer from severe pain at the time of labour. Melzack, Teanzer, Fiedmen and Kinich (1981) and Melzack, Wall and Ty (1982) questioned Lamaze's (1970) contention that prepared childbirth training would abolish labour pain. But at the same time, the prepared childbirth movement has a valid point to convey to health professionals. Childbirth is quite often regarded as another medical issue by obstetricians and perhaps anesthetists as well. So childbirth becomes an appropriate occasion for administering maximum surgical and chemical intervention, forcing prospective parents to toe the line of obstetricians and anaesthetists in a situation which is basically an emotionally fulfilling, happy and memorable event. Lumley and Astburg (1980) point out that emphasis on pain control in the prepared childbirth movement obscures recognition of the psychological individuality of each mother and her unique anxieties, expectations, problems, needs etc. So it has become quite necessary now that obstetricians, and other health professionals should work together towards the main goal of ensuring physical safety and psychological fulfillment.

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TABLE 1

Typical Menstrual Cycle

Menstrual Phases	*Typical Number of Days*	*Hormonal Actions*
Follicular (Proliferative) Phase	Cycle Days 1 through 6: Beginning of menstruation to end of blood flow.	Estrogen and progesterone start out at their lowest levels. FSH levels rise to stimulate maturity of follicles. Ovaries start producing estrogen and levels rise, while progesterone remains low.
	Cycle Days 7 - 13: The endometrium (the inner lining of the uterus) thickens to prepare for egg implantation.	
Ovulation	Cycle Day 14	Surge in LH. Largest follicle bursts and releases egg into fallopian tube.
Luteal (Secretory) Phase, also known as the Premenstrual Phase	Cycle Days 15 – 28:	Ruptured follicle develops into corpus luteum, which produces progesterone. Progesterone and estrogen stimulate blanket of blood vessels to prepare for egg implantation.
	If fertilization occurs:	Fertilized egg attaches to blanket of blood vessels which supplies nutrients for the developing placenta. Corpus luteum continues to produce estrogen and progesterone.
	If fertilization does not occur:	Corpus luteum deteriorates. Estrogen and progesterone levels drop. The blood vessel lining sloughs off and menstruation begins.

(*a*) *Dysmenorrhoea / Painful Periods:* Dysmenorrhoea is the medical term for painful periods. Most women experience period pains at some time, but the severity of the symptoms varies from woman to woman and ranges from mild discomfort to excruciating pain together with nausea and vomiting.

(*b*) *Oligomennorhoea / Irregular Periods:* Throughout their fertile life, for reasons one does not understand, some women never establish a regular menstrual cycle. Irregular periods are also common during the first 2 or 3 years after the menarche (the onset of menstruation), for a few months after giving birth or following a miscarriage or termination, and during the peri-menopause or climacteric, the time just before your periods finally stop, called the menopause.

(*c*) *Amenorrhoea / Lack of Periods:* Amenorrhoea falls into two categories. Primary amenorrhoea occurs when a girl does not start her periods at all. More common is secondary amenorrhoea, where your periods have started but then abruptly stop for more than 6 months.

(*d*) *Menorrha / Heavy Periods:* On average, women lose 20 to 80 mls blood with each period. More than 80mls is considered excessive. There can be different causes that lead to excessive flow of blood during menstruation, including fibroids. Excessive bleeding can lead to anaemia and the symptoms of looking pale, feeling tired and weak, and shortness of breath (Moos, 1968).

(*e*) *Pre-Menstrual Syndrome (PMS)*: PMS (also called Premenstrual Stress or Premenstrual Tension) is a collection of physical, psychological and emotional symptoms related to a woman's menstrual cycle. Women (about 80 to 95 percent) of child-bearing age have some premenstrual symptoms. Between 15 and 20 percent have large discomfort. The symptoms often start between 4 and 10 days before the first day of the *menstruation* and vanish after the bleeding starts. About 14 percent of women

in the age from 20 to 35 years get so affected that they must stay home from school or work.

The symptoms of PMS can vary from one month to the next (Table 2). Underlying depression and stress can often make the symptoms of PMS much worse. For some women with PMS, the symptoms are so severe that they are considered disabling. This form of PMS has its own psychiatric designation: *premenstrual dysphoric disorder* (PMDD).

TABLE 2

Symptoms of PMS

Physical Symptoms	*Psychological/ Emotional Symptoms*
Food and alcohol cravings.	Decreased sex drive.
Headaches and backache.	Depression.
Skin problems like acne.	Insomnia.
Swollen joints, particularly ankles.	Irritability.
Water retention.	Poor concentration.
Breast tenderness.	Weepiness.
Weakness.	Mood swings.
Weight gain.	Tension or anxiety

Based on the predominant symptom PMS may be classified as:

Type of PMS	*Symptom*
PMS – A	Anxiety and tension
PMS – C	Food cravings
PMS – H	Hyper-hydration (water retention)
PMS- D	Depression

What Causes It?

While the exact cause of PMS is unknown, the most popular theories include

- hormonal changes (estrogen excess or progesterone deficiency),

- fluctuations of serotonin, (an inhibitory neurotransmitter) level
- hypoglycemia (low blood sugar),
- vitamin B_6 and mineral deficiency,
- abnormal metabolism of prostaglandin (hormone-like substances),
- excessive fluid retention,
- endorphin (a substance in the brain that provides pain relief) withdrawal.
- Other possible contributors to PMS include eating a lot of salty foods, which may cause fluid retention, and drinking alcohol and caffeinated beverages, which may cause mood and energy level disturbances.

Women with a history of the following conditions are at a higher-than-average risk for having PMS.

- Dysmenorrhea (painful menstruation)
- Depressive, mood, anxiety, or bipolar disorders (family history, too)
- Postpartum depression or psychotic episodes
- Stress

How Serious is Premenstrual Syndrome?

PMS can affect the normal lives of women:

(*i*) *Effects on Relationships:* Premenstrual syndrome, particularly premenstrual dysphoric disorder (PMDD), can have an adverse effect on women's relationships with co-workers, partners, and children. The greatest negative impact of symptoms was on their home life, their social life and their work.

(*ii*) *Risk for Suicide:* As many as 10% of women who report PMS symptoms, particularly premenstrual dysphoric disorder

(PMDD), have had suicidal thoughts. One study suggested that women who attempt suicide, in fact, are more likely to do so during the premenstrual phase or in the first days of the period.

(*iii*) *Risk for Major Depression:* Depression and PMS often coincide, and may, in some cases, be due to common factors.

(*iv*) *Substance Abuse:* Women who are alcoholics or have close relatives who are alcoholics, have a much higher risk for drinking during the premenstrual period. Alcohol worsens PMS symptoms and may increases the risk for prolonged cramping (dysmenorrhea) in women who suffer from this menstrual symptom.

Studies also have found a higher incidence of smoking in women with premenstrual dysphoric disorder than in women without PMDD.

(*v*) *Magnification of Other Medical Conditions:* A number of conditions worsen during the premenstrual or menstrual phase of the cycle, a phenomenon sometimes referred to as *menstrual magnification*.

Migraines: Although half of women with migraines report they are related to menstruation, experts believe that true menstrual migraines are less common than originally thought. Typical menstrual migraines are usually without auras and regularly occur during the first three days of menstruation, but not during ovulation or right before a period.

Diabetes: The menstrual cycle may also affect diabetes, a disease that is defined by low levels of insulin or resistance to this hormone that is critical for efficient use of sugar (glucose) in the body. High estrogen and progesterone levels, which occur in the luteal phase, affect insulin, although their effects vary widely among individuals.

Asthma: It has long been known that asthma often worsens during the premenstrual period, with one study estimated that

40% of women with asthma are affected at that time. Some research has suggested that during the premenstrual period there is increased activity of a combination of asthma-inducing effects, including lower resistance to stress and infections and increased hyper-reactivity in the airways of the lungs.

Other Disorders: Many other chronic disorders may be exacerbated during the premenstrual phase, including epilepsy, multiple sclerosis, systemic lupus erythematosus, inflammatory bowel disease, and irritable bowel syndrome. Women are also more prone to seasickness in the premenstrual phase.

Hence management of PMS is important so that women affected by this may live happier and healthier lives.

Management of PMS

Management may involve Prevention or Treatment of the symptoms. This involves:

1. Psychological intervention
2. Medical intervention
3. Natural Treatment

1. *Psychological intervention:* The psychosomatic nature of PMS and the number of psychological disruptive symptoms necessitate Psychological interventions. These are *safe and very effective.* These involve stress management and relaxation training. These improve cognitve abilities which are impaired by PMS.

Psychotherapy, relaxation therapy, muscular relaxation and mind expansion exercises show *significant reduction* in the level of premenstrual distress and changes in personality. These lead to reduction in neuroticism, psychoticism and anxiety (Mohan and Jogi, 1989; Mohan and Chopra, 1985, 1986, 1986a, 1987).

2. *Medical intervention:* This includes drug therapy and/or surgical procedures

(*a*) Drug Therapy generally includes the following:

- *Nonsteroidal anti-inflammatory drugs (NSAIDs):* These block prostaglandins, substances that dilate blood vessels and cause inflammation. Taken before or at the onset of your period, NSAIDs such as ibuprofen or naproxen sodium can ease cramping and breast discomfort.
- *Oral contraceptives:* These stop ovulation and stabilize hormonal swings, thereby offering relief from PMS symptoms by reducing physical and emotional symptoms of PMDD.
- *Antidepressants:* Selective serotonin reuptake inhibitors (SSRIs), which include fluoxetine (Prozac,), paroxetine and sertraline, are drugs that keep higher levels of serotonin available in the brain have been successful in reducing symptoms such as fatigue, food cravings and sleep problems. SSRIs give relief not only from premenstrual dysphoric disorder but also physical symptoms, irritability, and tension. SSRIs appear to work much faster for relieving PMS-related depression than when used in major depression.
- *Antianxiety Drugs:* Antianxiety drugs (called anxiolytics) may be helpful for women with severe premenstrual anxiety that is not relieved by SSRIs or other treatments. *Buspirone.* Buspirone (BuSpar) is a unique antianxiety agent known as an azapirone reduces premenstrual irritability.
- *Medroxyprogesterone acetate (Depo-Provera):* For severe PMS or PMDD, this injection can be used to temporarily stop ovulation. However, Depo-Provera may cause an increase in some signs and symptoms of PMS, such as increased appetite, weight gain, headache and depressed mood.

- *Diuretics,* for bloating and water retention.
- *Beta-blockers and calcium-channel blockers,* to prevent the onset of migraine headaches.

(*b*) *Surgical and Other Procedures:*

Women whose symptoms are severe and do not respond to treatment may need to undergo a hysterectomy, including removal of the ovaries, followed by estrogen replacement therapy.

Treatment for PMDD is similar to that of premenstrual syndrome, but may be more intense.

3. *Natural Treatment of PMS:* A healthy, balanced diet and regular exercise can help to reduce the symptoms of PMS. Therapies such as acupuncture, aromatherapy, Bach remedies, homoeopathy and massage may also help to alleviate the physical and psychological symptoms of PMT.

(*a*) *Nutrition:* Decreasing or avoiding caffeine (including chocolate), saturated fats, sugar, salt, dairy, meat, poultry, and alcohol can help reduce the intensity and duration of symptoms. Nutritional deficiencies may be addressed with these supplements.

- Vitamin B_6 (100 to 200 mg a day) with B-complex (50 to 100 mg a day)
- Magnesium (400 mg a day)
- Vitamin E (400 to 600 IU a day), especially with breast tenderness
- Essential fatty acids: omega-3 and omega-6 (3,000 to 4,000 mg a day for three months, then decrease dose by 1,000 mg every two months)
- Chromium (250mcg) to control sugar cravings.

(*b*) *Herbs:* Herbal remedies may be helpful in alleviating symptoms of PMS:

- Chaste tree (*Vitex agnus castus*): The fruits of *Vitex agnus castus* (the chaste tree) contain a mixture of iridoids and flavonoids, and some compounds similar in structure to the sex hormones. The effects of agnus castus have been described as similar to those of the corpus luteum. The mechanism of action may also be related to modulation of stress induced prolactin secretion via dopamine, without directly affecting luteinising hormone or follicle stimulating hormone. Binding to opioid receptors, endorphins, and neuroactive flavonoids may also have a role. The plant has been used traditionally to relieve the symptoms of the premenstrual syndrome, although systematic evaluation of its efficacy is relatively recent (Du, 1993; Hobbs, 1991; Wuttke, Jarry, Christoffel, Spengler and Seidlova-Wuttke, 2003).
- Black cohosh (*Cimicifuga racemosa*) produced relaxation of the uterine tissues and brought improvement in PMS.
- Bugleweed (*Lycopus virginicus*) has been approved by German Commission E for management of nervousness, insomnia and PMS.
- Shepherd's purse (*Capsella bursa-pastoris*) has also been approved by German Commission E for PMS.
- Valerian (*Valeriana officinalis*) or kava kava (*Piper methysticum*) for reduction of anxiety.
- Milk thistle (*Silybum marianum*)
- Dandelion (*Taraxacum officinale*) root and/or leaves as a tea or tincture can be used as a diuretic.
- St. John's wort (*Hypericum perforatum*) for depression associated with PMS. Studies have shown that the plant brings about significant reduction in symptom severity (Huang and Tsai, 2003).

- Standardized Ginkgo biloba extract (EGb 761) was effective against the congestive symptoms of PMS, particularly breast symptoms. Neuropsychological symptoms were also improved (Tamborini and Taurelle, 1993).
- Evening Primrose Oil and Starflower Oil both contain the fatty acid Gamma Linoleic Acid, which helps to regulate hormone balance, and has been shown to relieve abdominal swelling and breast discomfort, and also to reduce irritability and depression.
- Dietary soy isoflavones reduce the complexity of premenstrual syndrome (Kim, Kwon, Kim and Reame, 2006).
- Herbal diuretics like Chamomile tea, remove some of the body's retained fluid. Stronger herbal diuretics, such as boldo, dandelion, juniper and parsley can also be used. Most herbal diuretics work gently on toning and strengthening the body's kidney function, with none of the harsh effects of conventional diuretics.
- The herb Wild Yam, which contains phytoprogesterone, a natural form of progesterone (Fleming, 2000).

(*c*) *Homeopathy:* There have been few studies examining the effectiveness of specific homeopathic remedies. Professional homeopaths, however, may recommend one or more of the following treatments for PMS based on their knowledge and clinical experience.

- *Chamomilla* — for intense menstrual pain; this remedy is most appropriate for individuals who are extremely irritable, angry, and have frequent mood swings
- *Cimicifuga* — for feelings of hysteria, frustration, and being overwhelmed; this remedy is most appropriate for individuals who have labor-type pains that migrate

from one side of the body to the other and may involve the back or even sciatic nerve (the largest nerve in the body; extends from the lower back down through the legs and knees)

- *Colocynthis* — for cramps that are relieved by bending forward, abdominal massage, and warmth (such as a heating pad); this remedy is most appropriate for individuals who are extremely irritable and restless
- *Ignatia* — for emotional symptoms such as grief, panic, and mood swings; this remedy is most appropriate for individuals who feel particularly vulnerable
- *Magnesia phos* — for sharp cramps that are relieved by bending forward, abdominal massage, and warmth (such as a heating pad), but are worsened by cold air
- *Nux vomica* — for individuals who are extremely irritable, confrontational, and feel nauseous
- *Pulsatilla* — for irregular periods with cramps, bloating, and/or mood swings as the predominant symptoms.

(*d*) *Acupuncture:* Although scientific evidence regarding the use of acupuncture for PMS is lacking, this condition is frequently treated by acupuncturists. Acupuncturists treat people with PMS based on an individualized assessment of the excesses and deficiencies of qi located in various meridians. In the case of PMS, a qi deficiency is usually detected in the liver and/or spleen meridians. Many treatments include moxibustion (a technique in which the herb mugwort is burned over specific acupuncture points), and qualified practitioners may also recommend herbal treatment or dietary modifications.

Self-help Measures to Reduce PMS Problems

- Avoid putting yourself under unnecessary stress or setting unreasonable goals.

- Relax by taking gentle exercise, such as yoga, and by taking warm baths.
- Good diet.
- Plenty of water.
- Reduce smoking and alcohol intake.
- Exercise.
- Self-relaxation techniques/reduce stress.

CONCLUSION

Menstruation marks a significant beginning in a woman's life but this also brings many problems. PMS is experienced by a large majority of women. In many instances this is tolerable but when the symptoms start interfering with personal, social or work life, management becomes necessary. Psychological interventions are safe and effective. Medical interventions give relief from various symptoms of PMS. However, these days people are turning to natural treatments including complementary and alternative systems of medicine since these give relief with minimum adverse effects. A combination of psychotherapy and drugs or alternate therapy give maximum relief. The ultimate goal of all interventions is to alleviate the suffering of women due to PMS.

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11

Attributional Style of Shy Females

Vandana Sharma, Vidhu Mohan and Shruti Bhalla

At the core of our existence as human beings lies a powerful drive to be with other people. There is much evidence that in the absence of human contact people fall apart physically and mentally; they experience more sickness, stress and suicide than well-connected individuals. For many people, however, shyness is the primary barrier to that basic need (Carducci, 2000).

Shyness may be defined experimentally as discomfort and/or inhibition in interpersonal situations that interferes with pursuing one's interpersonal or professional goals. It is a form of excessive self-focus, a preoccupation with one's thoughts, feelings and physical reactions. It may vary from mild social awkwardness to totally inhibiting social phobia. Shyness may be chronic and dispositional, serving as a personality trait that is central in one's self-definition. Situational shyness involves experiencing the symptoms of shyness in specific social performance situations but not incorporating it into one's self concept. Shyness reactions can occur at any or all of the following levels: cognitive, affective, physiological and behavioural and may be triggered by a wide variety of arousal cues. Among the most typical are: authorities, one-on-one opposite sex interactions, intimacy, strangers, having to take individuating action in a group setting, and initiating

social actions in unstructured, spontaneous behavioural settings. Shy people are strongly motivated to avoid social interactions because of the anxiety and negative arousal experienced in such situations.

According to Buss (1986), there are two subtypes of shyness. *Fearful* shyness is thought to develop in infancy (during the second half of the first year) and involves inhibited responses to strangers.Consequently, individuals with this fear may withdraw or isolate themselves from novel social settings. *Self-conscious* shyness emerges at approximately five of six years of age concomitant to the child's development of a sense of self and their ability to take the perspective of others (Buss, 1986). Buss argued that this ability of perspective taking might lead the individual to develop worries about being evaluated. Support for this theory was obtained by Miller (1995) whose investigation of a sample of undergraduates revealed positive correlations between shyness and a fear of evaluation as well as with approval motivation.

Shyness experts vary in their views about whether childhood shyness leads to mental health problems later. However, the practical and emotional problems caused by shyness are apparent. As a practical matter, shy children obtain less practice of social skills and develop fewer friends. They tend to avoid activities, such as sports, drama, and debate that would put them in the limelight. Shy children tend to be perceived as shy, unfriendly, and untalented, and they tend to feel lonely and have low self-esteem (Jones and Carpenter, 1986) and a higher than average level of gastrointestinal problems (Chung and Evans, 2000). Shy children tend to become anxious teens (Prior, Smart, Sanson, and Oberklaid, 2000). Peer interactions provide opportunities for children to learn important social skills (e.g., Rubin, Bukowski and Parker, 1998). Shy children are often thought to be at a disadvantage for the development of these essential social skills due to their limited social interactions. Researchers have speculated

that shy children who have underdeveloped social skills may eventually become aware of their shortcoming and may develop feelings of low perceived competence. Indeed, research on shyness has revealed negative associations with self-esteem and self-worth in later childhood and adolescence (e.g., Crozier, 1995; Hymel, Woody and Bowker, 1993; Rubin, Chen and Hymel, 1993). It may also be associated with varying levels of anxious thoughts (Cheek and Melchoir, 1990) and anxious physiology (e.g., Kagan and Snidman, 1991).

Shy adults tend to have smaller social networks and to feel less satisfied than others with their social support networks (Jones and Carpenter, 1986). Many shy individuals think of their shyness as a significant problem that hinders them in myriad ways (Zimbardo, 1986). Fortunately, some individuals act less shy as they become older (Zimbardo, 1986). Shy individuals underestimate their own ability to cope with social situations and are pessimistic about social situations in general, failing to expect favorable responses even when they believe that they are able to perform appropriately and efficaciously. They experience significant self-consciousness, which of course includes being self-conscious about being self-conscious. They spend a disproportionate amount of time focusing on themselves and their flaws and often compare themselves negatively against the most outgoing people—neglecting the fact that most people are just like them: fairly reserved. (Elmer and Hamilton, 2000)

With regard to the cognitive component of shyness, shy individuals report a greater frequency of negative self-referent thoughts as compared to positive thoughts during social interactions (Bruch, Gorsky, Collins and Gerger, 1989; Brusch, Hamer and Heimberg, 1995; Garcia, Stinson, Ickes, Bissonette and Briggs, 1991). The tendency to use negative cognitions is thought to be related to worries about receiving disapproval from others (Halford and Foddy, 1982; Leary, Kowalski and Campbell, 1988).

It has been showed that shy individuals tend to take blame for failures and externalize success. Such a focus on negative thoughts, i.e., selective attention to negative thoughts lead such individuals to take blame for failures and externalize success (Zimbardo, 1977). In the present study an attempt was made to explore the attributional style of adolescent girls as not much work has been done on such a sample in Indian setting.

METHOD

Sample

The study was conducted on a total sample of 60 females in the age-group of 18-22 years studying in two different colleges of Jalandhar city. All the participants belonged to urban areas. The socio-economic status of the participants was more or less homogeneous. They were from middle socio-economic class. The subjects were selected randomly.

Tools

The following scale was used in the present research:

Shyness scale by Cheek and Melchoir (1985). This scale was used to screen shy individuals. It consists of 13 items. It measures 3 components of shyness: emotions, personality, and personal well-being. The reliability of scale is .94.Scoring is done by assigning numbers 1, 2, 3, 4, 5 to different alternatives. For the items 3,6, 9, 12, scoring is reversed. High score indicates high level of shyness.

Locus of Control Scale by Nowicki and Strickland (1973). The scale consists of 40 statements that tell us about one's perception about one's LOC. The statements are to be answered in either Yes or No. It has consistently easy administration and adequately efficient reliability and validity. Low scores indicate internal LOC and high score indicate external LOC.

RESULTS AND DISCUSSION

The aim of the present research was to find the attributional style of shy females. The findings indicated a moderate significant correlation (0.44, $p<.01$) between shyness and locus of control, thereby indicating that shy individuals are more external. This means that these individuals think that nothing is in their hands and everything is controlled by factors present outside them, i.e., the environment, luck, circumstances etc. This kind of an attributional style is not self-enhancing. The tendency of shy individuals to be more external can be due to the fact that they are unfriendly, and untalented, and they tend to feel lonely and have low self-esteem (Jones and Carpenter, 1986). Moreover they believe that they are always being evaluated by others. Self-consciously focused on their own shortcomings, they fail to look around and notice that most people are just like them—listeners, not social standouts.The present findings are supported by the research that indicates that shy individuals, compared with non-shy individuals, exhibit a self-defeating attributional style in which positive self-relevant events are considered due to luck and other unstable characteristics, and negative self-relevant events are considered due to ability and other stable characteristics (Anderson and Amoult, 1985, Arkin, Appelman, and Burger, 1980; Leary, Atherton, Hill, and Hur, 1986; Teglasi and Hoffman, 1982). Furthermore, shy people tend to have maladaptive attributional styles primarily for interpersonal situations (Anderson and Amoult, 1985; Anderson, Miller, Riger, Dill, and Sedikides, 1994; Johnson, Petzel, and Johnson, 1991; Renshaw and Brown, 1993; Teglasi and Hoffman, 1982).

These individuals report a greater frequency of negative self-referent thoughts as compared to positive thoughts during social interactions (Bruch, Gorsky, Collins, and Gerger, 1989; Brusch *et al.*, 1995; Garcia, Stinson, Ickes, Bissonette and Briggs, 1991). The tendency to use negative cognitions is thought to be related to worries about receiving disapproval from others (Halford and

Foddy, 1982; Leary, Kowalski and Campbell, 1988). It is presumed that doubts about one's ability to contribute effectively to social interactions, coupled with fears of being negatively evaluated by others, could contribute to the inhibited behavior and social anxiety that characterize the behavioral and somatic manifestations of shyness (Crozier, 1995) further leading them to believe in external control of things. Such an explanatory/ attributional style is self-defeating as it prevents an individual to explore and use what he is capable of. Moreover when there is failure, the individual takes it on her.

Although much effort is being made (e.g., Haemmerlie and Montgomery, 1986) to help shy individuals overcome their inhibitions, the present findings indicate that since the shy individuals have a dysfunctional attributional style, they can be helped by making use of reattributional training. As a part of this training, their attributions can be made more realistic and self-enhancing. This would help them to believe in their own potentials, i.e., something internal. They can be trained to personalize success and not failure; stabilize and globalize the positive happenings. Such cognitions can further have a significant effect on their subsequent affect and performance. Reattributional training has been successfully used to alter dysfunctional attributions of depressives, low self-efficacy, low self-esteem individuals, aggressive, lonely, anxious individuals. Since shy individuals believe in external control, they can be taught to focus their attention on their self, realize and make use of their capabilities. The study has a limitation that only shy females served as subjects. Attributional style of shy male adolescents should also be assessed and compared with that of girls.

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STRESS AND MENTAL HEALTH

SECTION III

STRESS AND MENTAL HEALTH

12

Coping with Stress: A Gender Analysis

Anuradha Bhandari

The issue of gender differences in coping with stress has received scant attention in research on psychology. Stereotypical beliefs about gender and the way stress is handled lead to the belief that women primarily cope with adversity in an emotional fashion while men confront it in an instrumental, problem oriented way. This viewpoint parallels cultural beliefs in society that depict men as oriented towards autonomy and attempting to control the environment and women as nurturing and dependent on others.

Women in general have been found to suffer more from psychological distress, depression (Bhandari, Upmanyu and Goyal, 2002; Weissman, Bland, Joyce, Newman, Wells and Wittchen, 1993) and minor somatic disorders whereas men seem to be especially vulnerable to life threatening diseases such as cancer and CHD (Gupta and Gupta, 1996). Although throughout most of life men report healthier status than women, studies indicate that this health advantage decreases with age, perhaps due to their unhealthier life styles (Ross and Bird, 1994). However, it must be realized that gender related differences of health may also be associated with genetic differences or differences in activities and health hazards. The extent to which men and women are exposed to stress in society, the way men and women perceive

stress, their unique appraisals as well as availability of coping resources are also pertinent factors which must be recognized.

The stress and coping framework is considered one of the most powerful psychological paradigms to explain gender differences in health and health related behavior. Coping has been viewed by most of researchers (Folkman and Lazarus, 1980; Stone and Neale, 1984) as a dynamic process, yet it has often been measured as a static construct (i.e. style, disposition, tendency). In a similar vein, coping has frequently been conceptualized as a state or as triggered by situational contingencies (i.e., a transitory or fluctuating condition), yet it has often been measured as a personality trait or as a generalized belief (i.e. a permanent or enduring personality attribute: Carver, Scheier and Wintraub, 1989).

Gender is invisible in a large segment of research on coping with stress. Coping is treated as an abstract concept that is untouched by such individualizing characteristics as gender, race or class (Bramson, 1985; Flach, 1988). Many earlier studies have employed participants who were men and it was presumed that these individuals possessed numerous resources to aid in the coping process enabling the experience of stress to be positive and growth enhancing. However, the more recent trend in theories of coping has been to include the study of both women and men. Coping is viewed as a process rather than a trait that varies from situation to situation for any one individual rather than remaining constant (Folkman and Lazarus, 1980). This view of coping also brings the social context of the individual to the forefront of analysis and provides interesting possibilities for understanding the impact of social forces on individual's coping efforts. Yet, gender remains a marginal analytic variable that is usually defined only in terms of sex differences. Exclusive focus on such differences results in a deficit view of women's coping. Folkman and Lazarus (1980) in the study done on 100 white men and

women have argued that men use more problem-focused coping than women in situations that had to be accepted. They say perhaps men persevere in problem-focused coping longer than women before deciding that nothing can be done; and even when nothing can be done men may be disposed to think about the problem more than women. The language that they use implied that men coped better. Similarly, in an earlier study, they have also tended to revert back to traditional gender models when discussing their results on coping. No mention is made of the fact that women employ strategies such as negotiation and forbearance more often than men.

According to Banyard and Graham-Bermann (1993) what one learns from looking at the literature on gender and coping is that women do not cope as well as men regardless of little conclusive evidence to show this is the case. They argue that value is placed on only one side of sex differences, a practice that hinders discussion of women's strengths. In the process the concept of gender is over simplified and seen as a unitary biological trait rather than as a process that changes in interaction with its environment. (Hare-Mustin and Marecek, 1990). Coping is highly specific both to the individual and the context (Folkman and Lazarus, 1984) and women inhabit diverse contexts depending upon their age, class and race. Therefore, one must investigate a broad range of situations before one can say that there is a general theory of coping or which type of coping strategies lead to more favorable psychological outcomes. Secondly, there is not enough emphasis on the issue of power and how it mediates in the stress and coping process. There is enough evidence that access to resources, such as education and income, influences coping. According to theories about coping those with more power do better. Women as a population are marginalized in Indian culture having less access to resources especially the large section of them who live in poverty.

Coping Strategies

A number of studies show that men engage more in problem focused ways of coping (Lazarus and Folkman, 1984) or individualistic, sometimes aggressive behavior such as turning against others (Hobfoll, Dunahoo, Porath and Monnier, 1994). Women in contrast, appear to engage more in emotion focused coping (Carver, Scheier and Weintraub, 1989) or seek more social support (Jung, 1995). For example, in a study of middle-aged married couples, Stone and Neale (1984) found that men used more direct action while women endorsed more emotion-focused strategies such as distraction, catharsis, tension release and prayer. McDonald and Korabik (1991) found that male managers reported coping strategies which can be categorized as avoidance/ withdrawal while female managers reported that they were more likely to talk to others and seek social support when experiencing stress. Regarding coping strategies, Lim and Teo (1996), found gender differences on two coping strategies, logic and social support. They reported that female IT personnel tend to seek social support and talk when they experience stress, while men tend to suppress their emotions and deal with problems in a logical, objective and unemotional manner. Tamres, Janicki and Helgeson (2002) in a meta analytic review of gender differences in coping behavior found that women are more likely to use coping strategies that involved verbal expressions to others or the self, to seek emotional support, ruminate about problems, and use positive self talk. Fotinatos-Ventouratos and Cooper (2005) reported that males were higher on the use of logic coping i.e., they tended to use an unemotional and rational approach to stress inducing situations, while females scored higher on use of coping mechanisms such as social support, task strategies like planning and organizing, time management, involvement, relationships than men.

In general, studies show that women more than men engage in emotion focused ways of coping. Many researchers assume

that emotion oriented coping is a less adaptive way of dealing with stress. According to Lazarus and Folkman (1984), the effectiveness of coping is determined by examining it in relation to the demands of the situation. Situations that are controllable call for more problem- focused efforts because the individual is in a position to control the situation whereas situations that do not allow for control require adequate management of the emotions evoked by this situation. Biener (1987) found that among professional white women smoking behavior was a coping response to feelings of lack of control. She opined that traditional sex role socialization teaches women to be passive, to accept even controllable situations as beyond their powers of intervention. Women are also more often in subordinate positions in which they really do have little control. The result is that for women, the goal of coping is emotion-focused adaptation, making them quite susceptible to the use of strategies such as smoking to cope with negative stresses. Also, methodological problems relating to validity of conventional coping questionnaire responses must be considered (De Ridder, 1997), for they may elicit preferences in response to a general stressor instead of actual behavior adopted in specific situations (Ptacek and Dodge, 1994). Furthermore, studies that did not use traditional indices of coping, e.g., examining the order in which coping methods were used found that although men and women did not differ in the extent to which they applied problem-focused coping, men more often than women reported using it first in their coping sequence (Ptacek, Smith and Zanas, 1992).

Role constraint theory (Rosario, Shinn, Morch, and Huckabee, 1988) argues that apparent gender differences in coping with stressors may be explained by gender differences in the likelihood of occupying particular social roles and the differential constraints that accompany role occupancy for women and men. Thus, role constraint theory would predict that if individuals occupy the same social role, gender differences in coping strategy use would

disappear. Hamilton and Fagot (1988) found no differences in expressive (i.e., emotion-focused) and instrumental (i.e., problem-focused) coping strategies in undergraduate students. When confronting daily stressors, college students did not differ in their use of problem-focused coping strategies (Ptacek *et al.*, 1992). Sigmon, Stanton and Snyder (1995) reported that when males and females occupied a similar role (i.e., a student in school, family, relationship areas), they both used problem-focused coping strategies in general and in specific life domains. In fact, females reported using more problem-focused strategies than males in school and family situations.

Some studies have been concerned with the difference between the avoidance and approach coping strategies. Endler and Parker (1990) and Long (1990) have reported data that indicate that women endorse avoidant strategies more than men. However, others have reported opposite findings. Carver, Scheier and Wintraub (1989) and Sigmon, Stanton and Snyder (1995) have found that men are more likely than women to have reported using drugs and alcohol that are classified to be avoidant strategies. Avoidant coping may be a form of dealing with the emotional aspects of stress, since avoiding may also represent problem oriented handling. Also avoiding certain issues is often motivated by a need to survive by saving one's energy for dealing with other problems. This is particularly true of impoverished women who must daily struggle to procure the most basic resources for survival (Banyard and Graham-Bermann, 1993). Women avoiding an interpersonal conflict may actually enact actively and instrumentally upon their environment because they value harmony (Hobfoll, Dunahoo, Ben Porath, and Monnier, 1994).

Some researchers have questioned the relevance of the emotion-focused versus problem-focused classification as the most important distinction to understand differential coping behavior of women and men. Hobfoll *et al.*, (1994) have proposed an approach highlighting two other aspects of coping, namely active

versus passive and prosocial versus antisocial behavior. They found women acted more prosocially than men when confronted with stress. Men, on the other hand, were more likely to use antisocial and aggressive strategies, but also less assertive coping strategies than women. These gender differences however, were constrained by gender-role orientation. Active coping was related to lower distress for both men and women, while prosocial coping was beneficial for women but not for men - neither was antisocial coping for men. They concluded that men may have a narrower band of beneficial coping strategies.

Banyard and Graham-Bermann (1993) argue for the need to formulate an alternative model for coping behavior, taking a new view that starts from the lives and viewpoints of many women. Women's view will provide a vantage point from which to gain varied perspectives on the coping process. Belle's (1982) work on social support with low-income women has changed the notions of social support as a completely positive adjustment enhancing resource to an understanding of its profound cost for women through the contagion of stress. She found that members of a support network can condone negative and harmful behaviours such as substance abuse, and bring on the added responsibility of dealing with network members problems.

Problem solving efforts are more likely to be used when individuals are familiar with the situation and perceive more control, power or responsibility in a particular role domain. Gore and Colten (1991) have emphasized the profoundly interpersonal nature of stress for women because losses, disruptions and conflicts with significant others threaten their self-esteem. De Ridder (2000) has argued that if socialization of typical male and female behavior patterns played a role in stress and coping, the effects of socialization should be visible in traditional attitudes towards gender appropriate behavior. Unfortunately most studies incorporating gender role orientation demonstrate a moderating role of gender role orientation on the effects of biological sex on

coping behavior, but also show that biological sex continues to have a large main effect (Levit, 1991; Ptacek and Dodge, 1994). These findings also point to the relevance of situational appraisals as an important stage of the coping stress process that may account for differential reactions of men and women.

Some research suggests that women relative to men are more affected by life events and obtain higher ratings of how, upsetting an event is or how much adjustment would be required to deal with it (Sigmon, Stanton and Snyder, 1995). Women appraise a set of life events as likely to produce more stress and tension and as requiring more recovery time than men (Jorgensen and Johnson, 1990) and they are more inclined to label the experience of stress as 'emotion' which may lead to less anticipation of problem solving strategies (Robinson and Johnson, 1997). These findings are consistent with the notion that women as a group relative to men appraise potentially threatening events as more stressful. However, when more specific events are presented to men and women gender differences become less pronounced (Ptacek and Dodge, 1994; Sigmon *et al.,* 1995). Interestingly, research on appraisal strategies has revealed that women are more inclined to highlight potential dangers brought up by the situations while men have been found to make more use of such strategies as denial and avoidance. It is argued that such appraisal strategies may set men at a disadvantage in comparison to women especially when controllable stressors are concerned. Men's initial avoidance reactions may not allow them to perceive and act upon early warning signs and as a result leaves them overwhelmed by the problem once they realize it is of long term consequence and requires attention. Research seems to suggest that differential cognitive strategies may be socialized since they relate to different attitudes regarding stress. However, evidence of women's greater responsiveness to family role strains may reflect the salience that women attach to these roles relative to men.

CONCLUSION

As Lazarus and colleagues have highlighted, the coping process is an active dynamic exchange between the person and the environment. In the revised model of stress and coping (Lazarus, 1999) additional personal and environmental antecedents are shown as forming the person-environment relationship in which appraisal occurs through a process of relational meaning. Coping is viewed as a way of revising the relational meaning of person-environment, leading to the outcomes of emotions and their effects viz., morale, social functioning and health. The influences on which coping strategies are employed by people are complex and cannot simply be the result of socialization, role constraint or biological sex differences. To quote Banyard and Graham-Bermann (1993) 'we must move beyond paradigms that are ready to label women as individually deficient to capture the larger forces that are at play in their lives... We need a methodology that will not be disempowering to participants'. Any model developed to explain gender differences in coping strategies will need to take into account developmental differences, socialization practices and changing social roles.

It is also pertinent to acknowledge that there is a widespread use of western-constructed self- report measures of coping. The complexity of the coping process cannot be understood by using primarily quantitative self-ratings because these are too blunt to capture the subtlety of stressful encounters. Coping must also be investigated using qualitative techniques to capture the reality of the individual undergoing such an experience. Investigators need to determine whether same coping strategies hold similar subjective meanings across ethnic, cultural groups. Is the coping response to for e.g. domestic violence same for American women, Chinese women, urban Indian women, rural Indian women or a female professional and a migrant domestic helper? The ways in which one copes with life's stresses have implications for psychological and physical health. The challenge is also to

examine the coping processes involved naturalistically, longitudinally and in-depth i.e., inter-individually as well as intra-individually. It would therefore be significant and meaningful to study self reported effective coping responses across diverse groups of women, of varying socio-economic inequalities across cultures.

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13

Women and Mental Health

Karobi Das and Adarsh Kohli

There has been an increasing recognition of the fact that women are at the receiving end due to the destructive effects of gender inequalities and the stresses that differentially affect them.

The conditions that society accepts as normal or ordinary often lead to mental health problems in women. Women face dilemmas and conflicts in the contexts of marriage, family relationships, reproduction, child rearing, divorce, aging, education and work.

Stresses that have more impact on women and may contribute to a higher risk for depression include: physical and sexual abuse; sexual harassment, sex discrimination; unwanted pregnancy; divorce; poverty and powerlessness. Epidemiological data links mental disorder with alienation, powerlessness and poverty, conditions more commonly experienced by women (Russo, 1986).

Theories

Significant changes have taken place in the beliefs and expectations about women's roles and identities in the contexts of work, family and community over the last decades. During the same time period there has been an increase of knowledge which

signifies the attempt to understand and explain the female experience. This new understanding has identified sex bias in psychological theories. During the renaissance it was believed that any women who claimed to have power to heal was a witch who could be cured only by torture or death. Showalter (1987) described how Darwinian ideas led to the view that biology determined destiny "there is sex in mind as well as in body". Female physiology marked women for different offices in life from those of men. Medical ideology fostered the view that a women's biological system predisposed her to ill health and failure. These ideologies highlighted the equivalence of mental illness and femininity and describe the presentation of women's symptoms. Thus, the concept of the hysterical female was born. Women were repeatedly diagnosed and treated for what feminist writers viewed as culturally determined behavioral patterns.

The Freudian view of women as passive, inferior and receptive has profoundly influenced all successive theories. Some theories, such as behaviourism seemed to ignore women altogether. Women and women's role is discussed by the *learned helplessness theory of depression* which links depression to low self esteem and powerlessness. Rigidity towards sex differences and gender roles persisted into the late 1970's. Evidence for the persistence of sex role, stereotyping in health care has been observed in some research studies (Broverman, 1970). A healthy women was seen as having traits which differed from those of mentally healthy men. This placed women in a double bind as either rejecting feminine behaviour or being feminine at the cost of healthy existence. Feminists have campaigned for issues like violence against women which gave an impetus to the mental health movement and help set up rape crisis centre and refuges for battered women. This has also helped to develop preventative programmes and led to legislative change.

Today many developmental and psychological theories still present the male experience as the norm and ignore or negatively evaluate women's differences in relation to these norms. It is important to consider the female experience and its context is essential to developing better theories and in providing empowering strategies (O'Rourke, 1984).

A range of studies indicate that women are disproportionately affected by mental health problems and that their vulnerability is closely associated with marital status, work and roles in society. In epidemiological community based studies (Russo, 1990) it was found that women predominate in major depression, agoraphobia and simple phobia whereas men predominate the antisocial personality and alcohol abuse/dependency. Women were more likely than men to have received a diagnosis of dysthymia, obsessive compulsive disorder, somatization disorder and panic disorder. Social factors may help women's adjustments to certain disorders. For example less and lower social role expectations, more social support and greater societal and parental tolerance of women's schizophrenic symptoms (Report Health Care, 1991).

It has been observed that emotional problems are more in women because of the multiple roles that they are engaged in as compared to men. Few reasons for the above observations can be as follows:

- men have two sources of gratification–work and family, whereas women have only one family.
- raising children and keeping house is frustrating.
- the role of housewife is relatively unstructured and invisible.
- when a married women works she is in a less satisfactory position than the married male.
- expectations confronting women are unclear and different.

Married women have more mental health problems as compared to married men as shown by the community based and treatment studies. Findings are that education and the wife's participation in the labour force affects marital satisfaction which in turn affects the level of psychological distress. Education increases marital satisfaction whereas paid employment decreases it. Women working outside the home report more psychological well-being, less depressive symptoms especially where they have good social support, but report more depression where social support is less (Parry and Shapiro, 1986). Studies of female physicians have yielded mixed results. Most female physicians indicate that they are generally satisfied with their careers. It has been seen that even with long hours, less work control, and a belief that motherhood had slowed their careers, 81% of women in academic medicine were found to be satisfied with their careers (Frank and Hudgins, 1999). The possible explanations could be that professional women despite multiple stressors have lower job expectations than men, are socialized not to express discontent, have supportive spouses, value different characteristics in a career than do men (Robinson, 2004).

High levels of depressive symptoms were common among women without confidants, child rearing assistance, employment, economic problems and chronic stressful conditions (Belle, 1990; Brown, Bhrolchain and Harris, 1975; Makosky, 1982). Other studies have reported poverty, low income unemployment and single parent status with depressive symptoms.

Women are at a greater risk for depression than are men, especially during the reproductive years. They report clinically significant menstrually related emotional as well as physical symptoms (Steimer and Streimer, 1999). Epidemiological studies have consistently shown that depression is about twice as common in women (Kessler, McGonagle, and Swartz, 1993). World Health Organization also reported similar findings from 14 countries that ratio of this is being 2:1 (Maier, Gansicke and Gater, 1999).

The increased vulnerability for women to develop mood disorders in particular during the child bearing years has been documented by many authors (Weissman and Olfzon, (1995). Dunner (1998) observed that Bipolar II disorder characterised by episodes of hypomania and depression occurs more frequently in women than in men.

Psychiatric admissions also show an increase during the first three months post partum. Post partum blues is the most common and least severe post partum illness, affecting between 50% and 80% of new mothers (Kennerly and Gath, 1999; O'Hara, 1991). Although the blues do not require intervention, it is important to note that this "normal" syndrome appears to be a risk factor for later depression. Upto 20% of women with the blues will experience major depression in the first post natal year (Campbell, cohn and Flanagan, 1992; O'Hara, 1991).

Menopause is another time in the reproductive cycle that is marked by hormonal change and depression. Data from the cross-national epidemiologic study conducted by Weisrman (1996) suggest that there is an increase in new onset of depressive illness in women aged 45 to 50 years (during the peri-menopause). The evidence supports this linkage that women with a prior history of depression are at increased risk for depression at menopause.

Gynaecological surgery poses a unique stress for women because of the identification of the reproductive organs both with sexuality and with the wider concept of feminine identity. This stress is particularly apparent when one considers hysterectomy. There is a high incidence of this operation world wide, more so in the west and has a long reputed association with psychological and sexual sequelae.

Several investigators reported that hysterectomy was associated with adverse psychological sequelae as evidenced by an increasing incidence of psychiatric referral. These findings from retrospective studies have not been confirmed by the more recent

prospective studies. The poor premorbid status (as evidenced by mental status and personality inventory scores) was related to poor psychological outcome, as reported by Henderson, Byrne, and Duncan-Jones (1981). Most of the emotional symptoms experienced do reduce to normal levels after consultation with specialists in majority of women with gynaecological problems.

The problems of old age are largely the problems of women. Large numbers live alone and widowed, often without a network of available family resources. Research in several countries suggest that a larger proportion of the longer life span is actually spent in pain and ill health. Negative images of the elderly women as unattractive, dependent and physically ill have significant psychological and social repercussions. Major diagnoses during this period of life are depression, organic brain syndromes and the dementias. Anxiety is another common problem for elderly women and social and economic factors are the primary contributing factors. Another area of concern is the use of psychotropic drugs–the harmful side effects and drug interactions.

For the elderly women the emotional quality of their social activities and the degree of satisfaction with social relationships are the important predictors of morale. These relationships provide acceptance, restores confidence in feeling useful and participation in leisure activities.

Women's mental health cannot be considered in isolation from social political and economic issues. When women's position in society is considered, it is clear that there are sufficient causes in current social arrangements to account for the excessive amount of depression and anxiety experienced by them. Women experience and respond to stress quite differently than do men. This is reflected in the number of social roles women fill as wife, mother, daughter and carer of others. Beyond this her reproductive role of bearer, producer, feeder and nurturer of children produces

unique potential for stress related effects as shown by Dennerstein, Astbury, Morse (1993) Present chapter has tried to capsulised the factors of mental health in special relation to a woman.

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14

Mental Health of Women: A Cross-cultural Perspective

Aradhana Shukla

Culture is an emerging property of individual on the basis of which persons deal with their natural and human environment. It is defined as a rubric of patterned variable and also, as a super ordinate construct that provides meaning, definition and coherence to its' members, such as solving subsistence and psychological needs. Through this process culture impacts the behavior of the persons living in particular segment and makes them different with other persons of other cultural segments. In this investigation an attempt was made to seek out the cultural differences of Kumauni with general Kumaunies of Kumaun hills, Uttaranchal in relation to the pattern of psychological well-being emotional disturbance, and temperament. Delineation of concepts is as follows:

Emotional Disturbance

The term emotionally disturbed has been widely treated in different sources. Emotionally disturbed child has been defined by Bower (1959) as, "one having a higher degree of vulnerability to behavior problems and who as an adult will exhibit this

vulnerability in general health problems or interpersonal relationship, inability to function sexually or economically, inability to profit from experience or lead a happy life... A child who is unable or will be unable to take the strings and arrows of life craving in, becoming immobilized or exploding". Kvarceus and Miller (1959) have mentioned that when the behavior of individual is unlike that of his peers and it is not apparent how the behavior was learned, usually comes under the category of emotionally disturbed. Valett (1963) stated that "for the purpose of education, emotionally handicapped pupil is a child who is suffering from an affectional disturbance, which interferes with the establishment of normal human relationship and results in an impairment of learning."

Good (1973). mentioned that emotional disturbance is a deep rooted problem, involving the control and expression of feelings, Emotionally disturbed children are described by Kauffman (1974) as those, "whose behavior may be at odds with others' expectations or with their own expectations for themselves.... Children..., who chronically and markedly respond to their environment in socially unacceptable and/or personally unsatisfying ways". Hallahan and Kauffman (1978) have summarized that there is no universally accepted definition of emotionally disturbed adolescent.

Thus, emotional disturbance is a psycho-emotional state of withdrawl, isolation, fear, anxiety and pessimism. It is the key of behavioural disturbance and it can be watched in many sorts of behavior like withdrawl, guilt, fear and permission etc.

Temperament

Temperament consists of relative consistent, the basic dispositions inheritent in the person that underline and modulate the expression of activity, reactivity, emotionally and sociability.

Major elements of temperament are present in early life, and these elements are likely to be strongly influenced by biological factors as development proceeds. The expression of temperament increasely becomes more influenced by experience and context'.

The predominance of a particular kind of emotional relation with the persons "prevailing emotional state "determines his temperament. Temperament is that aspect of personality which is revealed in the tendency to experience moods or mood changes in characteristic ways. The outstanding quality of temperament is that it tends to be persistent and as much disclose the emotional which an important roles in human life.

Psychological Well-Being

Psychological well-being is a somewhat malleable concept which is to do with people's feelings about everyday life activities. Such feelings may range from negative mental states or psychological strains such as anxiety, depression, frustration, emotional exhaustion, unhappiness, and dissatisfaction etc to a state which has been identified as positive mental health (Jahoda, 1958; Warr, 1978) Scanning many studies on the perceived quality of life Campbell (1980) distinguished three types of well-being that is, affect, strain and satisfaction.

The concepts of psychological well-being and mental health, by and large, are used interchangeably by majority of the researchers. It is widely recognized that the concept of mental health focuses on an ideal state, emphasizing "positive well-being" of the WHO chart rather than on disease, statistical or conformity criteria. Negative components of psychological well-being are relatively easily assessed through self-report of anxiety, depression and frustration, etc., but it is difficult to assess positive components of well-being, Camphell, Converse and Rodgers (1976) wrote:

"It may be necessary to distinguish between satisfaction which is associated with an experience of rising expectations and one which is associated with declining expectations. An individual who has achieved an aspiration towards which he has been moving may be said to experience the satisfaction of resignation. The two individuals might be equally satisfied in the sense of fulfilled needs but the affective content associated with success and resignation may well differ. The difference may be less significant in experiences of dissatisfaction where affective content of disappointment and frustration might be expected to accompany any failure to achieve one's expectations."

Campbell *et al.,* (1976) have also stated explicitly the view that a given level of satisfaction can go along with different affective states. Thus, the study of psychological well-being/mental health might then be enhanced if the distinction between cognition and affect were more generally recognized and then, investigated.

Buxa-The Tribe of Uttaranchal

The Buxa tribals are mainly located in Bajpur, Sitarganj, Kashipur, Ramnagar, Dogadda and Pauri Garhwal of Uttaranchal and Kotwali, and Aligarh of Uttar Pradesh. Buxa also reside in 17 villages of Srimore district of Himanchal Pradesh but they are not termed as tribals. The total population of Buxa is 25,536 out of which 22,378 is spread over in Deharadun, Pauri Garhwal and Udham Singh Nagar of Uttaranchal Himalaya while 3,158 population resides in Bijnor. The Buxa constitute 13.62% of the total scheduled tribe population of the region.

The Raji

The Rajis, socially and economically, is the most underdeveloped tribal community of central Himalayan region of India. Raji people multilingual. But they comunicate with their neighboring communities in Kumauni and Hindi. According to

Samal (2000) Rajis are believed to be the descendants of Kirata who ruled over this area in pre historical time. They are also considered as a living link between Kiratas of somewhat Tibetan physique and the Khasa of equally pronounced Aryan form and habits.

It is worth to mention that considerable population of Rajis is living in Nepal and there is also strong social and official relation between the Rajis of India and Rajis of Nepal. Few decades back they used to avoid going to habituations of their communities, used to hide away in forests from people of Kamaun and the only relationship it had with other people was through porting of wooden implements and utensils. But now this scenario is changed and they are trying to mix up with other people.

In this way it is apparent that tribals are the people to be attended due to their cultural impoverishment and they need much interventions. On the basis of these notions this study was planned and it was aimed to ascertain the impact of cultural variation, age and marital status on well-being, emotional disturbance and temperament and well-being. The hypotheses were as follows:

- The level of emotional disturbance would be low in general Kumauni women followed by Buxa and Rajis participants.
- The magnitude of emotional disturbance would be higher in widow women.
- The level of emotional disturbance would be low in old women as compared to their young counterparts.
- There would be difference in the temperament of general Kumauni, Buxa and Raji women.
- The pattern of temperament would differ in widow and husband women.

- There would be difference in the temperament of young and old women.
- The magnitude of well being would be higher in General Kumauni women followed by Buxa and Rajis.
- The magnitude of well being would be higher in husband women.
- The magnitude of well being would be higher in old women.
- There would be adverse relationship between emotional disturbance and well-being.

Keeping these hypotheses in consideration this study was planned and it was aimed to find out the pattern of emotional disturbance, temperament and well-being as affected by cultural variation, marital status and age.

METHOD

Sample

One hundred twenty women from Kumaun Uttaranchal were taken in consideration and were arranged in accordance with the requirements, of 3×2×2 factorial design with 3 levels of cross cultural variation (General Kumauni, Buxa and Raji), 2 levels of marital status (Husbanded and Widow) and 2 levels of age (20-30 years and 50-60 years) with 10 participants in each cell.

Tools

The following measures were taken into consideration:

1. *The emotional disturbance scale:* Developed by Shukla and Dhami (2002) this scale consists of 90 five point items dealing with the sub-areas of emotional disturbance namely, withdrawal, feeling of isolation, rejection, day dreaming, feeling of guilt, conflict, low confidence, anxiety, nervousness and inferiority complex. These are the areas where emotional disturbance is

experienced or at least felt. Score ranges between 90-450. Low score indicates low emotional disturbance and high score vice versa. Split half reliability is .82 with reliability index of .92 and test retest reliability is .80 with reliability index of .89. This scale is successfully used in other studies of personality (Pande and Shukla, 2003; Kakkar, 2005; Kumari, 2005).

2. *The temperament scale:* In order to ascertain the pattern of temperament, a temperament scale was used. It is consisted of 150 five point items pertaining to 15 fields. The test retest reliability of the scale was found to be .79 and the split half reliability between first and second halves of the scale was .79. The cross validation yielded a correlation of .73.

3. *Psychological well-being:* Respondents completed a self report inventory deigned to measure six dimensions of psychological well-being derived from the literature on life span development, mental health and personal growth. It is a thirty itemed inventory and included six dimensions. Six dimensions were self acceptance, environmental mastery, purpose in life, positive relations with others, personal growth and autonomy.

Procedure

At first the investigator contacted Sitarganj and Didihat towns (Udham Singh Nagar and Pithoragarh districts of Uttaranchal) and Almora and made general acquaintance with the persons of the sample. In Almora, for the investigator while in Sitarganj and Didihat it was made possible by the help of gramsewak. Indeed, it was a very difficult job for the investigator to establish rapport with Buxa and Raji women in one setting because they were unfamiliar with the psyche of urban people. So, it took two or three informal visits to make them familiar with the investigator and getting ready for testing sessions. During testing sessions the investigator showed cordiality and cooperation with them and

explained items to them whenever required. So far as the matter of rapport with the women of Almora was concerned it took very less time. Data collection was done in three sessions and participants were tested separately. They understood the items and they responded actively and quickly. Best attempts were made to avoid external distractions.

RESULTS AND DISCUSSION

Obtained data were analyzed by 3 way analysis of variance and interpreted in terms of cross cultural variation, marital status and age as affecters of emotional disturbance, temperament and well-being. They are given below:

Pattern of emotional disturbance as affected by cross-cultural variation, marital status and age

Data of emotional disturbance scale were also analyzed by three way ANOVA and findings are given in table 1.

TABLE 1

Summary table showing the impact of cultural variation, marital status and age on emotional disturbance.

Sources of Variation	*Ss*	*df*	*Ms*	*F*
A (Cultural variations)	2.80	2	1.40	1.39
B (marital status)	6.79	1	6.79	6.73
C (Age)	9.87	1	9.87	9.77
AB	11.94	2	11.94	11.82
AC	24.98	2	12.49	12.37
BC	8.72	1	8.72	8.64
ABC	230.28	2	17.66	17.49
Error within	60.50	228	1.01	

Table 1 shows that the impact of cross cultural variation over emotional disturbance was insignificant (F,(1, 72)=1.39 P>.01). The next main effect of marital status was significant (F,(1, 72)=6.73 P<.01) and showed that the magnitude of emotional disturbance was higher in widow women (X=360.00)as compared to husbanded (X=323.59). The main effect of age was also significant (F,(1, 72)=9.77 P<.01) and it revealed that young women (316.17) were as emotionally disturbed than old ladies (356.74).

The cross cultural variation x marital status interaction was significant (F ,(1, 72)=11.82 P<.01) and a close perusal of data indicates that cross-cultural variation affected the emotion disturbance of married women. The next interaction cross-cultural variation x age level was also significant (F,(1, 72)=12.37 P<.01). This indicates that young women were found under more emotional disturbance than older ones. The interaction effect of marital status x age level was also significant (F,(1, 72)=8.64 P<.01). A close perusal indicates that young widows had more emotional disturbance than old women. The three way interaction of cross-cultural variation x marital status x age level was also significant (F,(1, 72)=17.49P<.01). Result shows that all variables, in sum, had laid their impact on emotional disturbance.

Area-wise Analysis of Emotional Disturbance Scale: In order to see the relationship between domains of emotional disturbance correlation between the General Kumaunies, Rajis and Buxas in relation to the areas of in emotional disturbance were computed and they are given in table 2.

Table shows good relationships among all areas of emotional disturbance in general Kumauni, Raji and Buxa women. Areas of emotional disturbance were also intercorrelated among husbanded and widows and finding are given in table 3. Here the same story was repeated.

TABLE 2

Area wise relationship of emotional disturbances between sub cultural groups.

S.N.	*Name of the areas*	*1*	*2*	*3*	*4*	*5*	*6*	*7*	*8*	*9*	*10*
1		1.00	.79	.64	.54	.59	.52	.69	.72	.64	.60
		1.00	.67	.74	.47	.49	.59	.66	.76	.52	.62
		1.00	.82	.67	.49	.66	.64	.70	.60	.59	.52
2			1.00	.59	.47	.49	.46	.59	.49	.56	.69
			1.00	..66	.57	.41	.65	.61	.48	.66	.64
			1.00	.70	.61	.50	.79	.62	.51	.52	.62
3				1.00	.59	.64	.62	.49	.59	.51	.61
				1.00	.74	.52	.60	.74	.52	.50	.49
				1.00	.69	.62	.60	.54	.50	.50	.47
4					1.00	.60	.59	.54	.56	.60	.59
					1.00	.70	.62	.64	.66	.69	.60
		1.00	.69	.70	.74	.69	.59	.50			
5					1.00	.64	.62	.59	.41	.49	
					1.00	.69	.52	.64	.47	.50	
					1.00	.59	.58	.59	.57	.60	
6						1.00	.52	.49	.50	.49	
						1.00	.46	.69	.60	.46	
						1.00	.43	.59	.59	.49	
7							1.00	.62	.56	.46	
							1.00	.59	.59	.52	
							1.00	69	.69	.57	
8								1.00	.47	.59	
								1.00	.51	.62	
							1.00	56	.64		
9								1.00	.52		
								1.00	.60		
								1.00	.59		
10									1.00		
									1.00		
									1.00		

Legends : General Kumauni, Buxa, Raji

TABLE 3

Area wise analysis of emotional disturbance in husbanded and widows.

N	*1*	*2*	*3*	*4*	*5*	*6*	*7*	*8*	*9*	*10*
1	1.00	.72	.55	.62	.78	.68	.82	.75	.69	.82
	1.00	.69	.72	.52	.68	.67	.54	.63	.73	.85
2		1.00	.72	.82	.95	.73	.67	.75	.78	.75
		1.00	.81	.75	.72	.65	.68	.58	.59	.62
3			1.00	.67	.63	.64	.72	.73	.74	.75
			1.00	.75	.62	.73	.63	.74	.65	.47
4				1.00	.75	.55	.73	.81	.81	.75
				1.00	.62	.62	.75	.85	.81	.76
5					1.00	.73	.65	.73	.65	.75
					1.00	.72	.69	.71	.69	.73
6						1.00	.75	.65	.82	.75
						1.00	.59	.72	.77	.79
7							1.00	.62	.75	.65
							1.00	.68	.73	.69
8								1.00	.68	.73
								1.00	.75	.74
9									1.00	.63
									1.00	.75
10										1.00
										1.00

Legends : General Kumauni, Buxa.

Impact of cultural variation, marital status and age on temperament

The aim of this was to find out the pattern of temperament as affected by cultural variation, marital status and age on temperament. Finding are given in table 4.

TABLE 4

Summary table showing the impact of cultural variation, marital status and age on temperament

Sources of Variation	*Ss*	*df*	*Ms*	*F*
A (Cultural variation)	18.83	2	9.41	8.41
B (Marital status)	8.36	1	8.36	7.46
C (Age)	2.68	1	2.68	2.39
AB	14.76	2	7.38	6.59
AC	15.03	2	7.52	6.71
BC	5.81	1	5.81	5.19
ABC	17.27	2	8.63	7.71
Error within	255.36	228	1.12	

A close perusal of the table reveals that the magnitude of discrepancy among general Kumauni, Buxa and Raji women was significant (F, 2,228=8.41 p<.10). It revealed that the magnitude of the temperament of general Kumauni women was relatively good (X= 339.92) as compared to Raji (X=417.97) and Buxa women (X=457.93). The next main effect of marital status was also significant (F, 1, 239=7.46 p<.01) and indicated that good temperament was shown by husbanded women (X=376.74) as compared to widow (X=405.59). The main effect of age was insignificant (F, 1,239=2.39 p>.50) and it found that age- related change was nominal among young (X=399.14) and old (X=411.40) women.

The two way interaction of sub cultural variation X marital status interaction was significant (F, 2, 239 = 6.59 p<.01). The next interaction of cultural variation and age was also significant (F,2,239=6.71 p<.01). The marital status X age interaction was also significant (F,1, 239=5.19 p<.01). The three way interaction of cultural variation, marital status and age was also significant

(F, 2, 239=7.71 p<.01). Significant interactions revel that all variable has their impact on temperament.

Areawise Analysis of Temperament Scale: in addition, an attempt was also to made to find out the interrelationship between the area of temperament scale. Since the number of areas was to much so, data were pooled totally and areawise interrelationship was obtained and the findings are given in table 5. Table revels that all area wise related significantly with each other.

TABLE 5

Area wise analysis of temperament scale

N	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	1.00	.74	.69	.54	.62	.74	.62	.54	.52	.57	.60	.66	.74	.64	.66
2		1.00	.67	.52	.59	.62	.56	.47	.69	.52	.64	.62	.52	.76	.59
3			1.00	.56	.68	.51	.60	.54	.51	.46	.69	.59	.51	.60	.70
4				1.00	.50	.61	.70	.57	.62	.41	.49	.67	.52	.62	.70
5			1.00	.58	.61	.51	.64	.53	.43	.48	.56	.60	.56		
6				1.00	.62	.54	.61	.70	.69	.46	.52	.72	.49		
7					1.00	.60	.74	.59	.49	.49	.59	.62	.72		
8						1.00	.62	.52	.60	.70	.52	.60	.59		
9							1.00	.48	.52	.62	.70	.59	.49		
10								1.00	.66	.74	.59	.69	.56		
11									1.00	.66	.52	.62	.54		
12										1.00	.42	.59	.60		
13											1.00	.60	.54		
14												1.00	.62		
15													1.00		

Legends : General Kumauni; Buxa.

Pattern of well-being as affected by cross-cultural variation, marital status and age

Data were analyzed by three way analysis of variance and findings are given in table 6.

TABLE 6

Summary table showing the impact of cross cultural variation, marital status and age on well being.

Sources of Variation	*Ss*	*df*	*Ms*	*F*
A	24.01	2	12.00	11.12
B	3.24	1	3.24	3.80
C	9.59	1	9.59	8.88
AB	18.06	2	9.03	8.37
AC	23.37	2	11.69	10.82
BC	9.38	1	9.38	8.69
ABC	26.50	2	13.25	12.27
Error within	224.24	228	1.08	

A close perusal of table 6 indicates that cultural variation had laid significant impact on well-being. (F-1, 72 = 11.12 p<.01). Mean values were : 278.82 310.18and 370.05 for general Kumauni, Buxa and Raji women, respectively. The next main effect of marital status was also significant (F1, 72=3.80 P<.05). Mean values were : 316.36 and 326.50 for husbanded and widow women. The next main effect of age was also significant (F1, 172=8.88 P<.01) and it indicated that subjective well -being was more positive in young ladies (M=312.67) than the old ones (M=330.19).

The cross cultural variations x marital status interaction was significant (F, 1, 72=8.37 P<.01) and it indicated that in spite of having difference in the score of well-being the magnitude was significant. The cross cultural variation x age interaction was significant (F, (1, 72=10.82 P<.01).

Result shows that cultural variation was more pronounced in younger women, while in old women the difference was relatively less. In addition, age related gulf was more pronounced in general

Kumauni women. The marital status x age interaction was also significant (F, 1,72=8.69 p<.01). The three-way interaction of cross-cultural variation x marital status x age was also significant (F, 1,72 = 12.27 p<.01), A close perusal indicates that all variables, in sum, laid their impact on well-being.

Emotional disturbance and well-being relationship

In order to find out the relationship between emotional disturbance and well being correlations were again computed. Findings are given in table 7.

TABLE 7

Relationship between emotional disturbances and well being.

			A		
	A1	A2	A3		
B1	B2	B1	B2	B1	B2
C1	-.49	-.49	61	-.62	-.41	-.53
C						
C2	-.56	-.56	-.70	-.51	-.59	-.64

Table 7 indicates that all correlations show adverse relationship between well-being and emotional disturbance. It means that increase in emotional disturbance retards the magnitude of temperament and well-being. Findings, in sum, are as follows:

1. The feeling of emotional disturbance was more or less same in general Kumauni, Raji and Buxa women and the positive temperament was more pronounced in General Kumauni.
2. Widows had less sense of emotional disturbance.
3. Age related discrepancy showed that young ladies were less disturbed than old women.
4. Negative relationship between emotion disturbance and temperament was found.

Obtained data were analyzed by analysis of variance and interpreted in terms of sub cultural variation, marital status and age level as effectors of emotional disturbances, temperament and well-being. Prior to the study some hypotheses were formulated and findings are discussed.

Sub-cultural variation in emotional disturbance temperament and well-being

The first and foremost notion was related with the pattern of emotional disturbance as affected by sub cultural variation. It was hypothesized that variation in subcultures would cause variations in emotional disturbance, temperament and well-being. Fortunately, the hypothesis was confirmed and it was found that difference in emotional disturbance, temperament and well being were caused by sub cultural variations. It was also visited that Raji and Buxa women were less emotionally disturbed as compared to general Kumaunies.

Culture is applied usually to the intellectual side of civilization or with emphasis upon the intellectual aspect of material achievement or to the degree of intellectual advancement of the individual. More specifically and technically, culture is the sum total of the arts, science, social customs and educational aims of the people regarded as an integrated whole. Since culture is the set or attitude and it differs from one another it is very sure that a person living in one culture will be entirely different from the other.

From the perception of an out sider looking it can be said that culture may be seen as affecting the way people think, feel and behave. But from an intense perspective, culture is basic and natural. When children are born, although they have the potential to learn any language and culture, they usually start up learning one particular language and culture. To most adult the particular culture that they usually have is natural and basic and other

cultures are viewed as foreign and alien. Without culture, one is reduced to basic animal instincts and one cannot think, feel and behave according to the way. Similarly, one cannot decide what is meaningful to communicate with others, and to manage the physical and social environment. At this time when one faces new situation which is not favorable one looses his balance in spite of dealing with them . It maybe revealed in terms of anxiety or fear. If one lives in a culture which is individual one can not find the new ways of life and live in a traditional pattern without breaking the cultural core. But when one lives in a collective culture one adopts the new strategies for coping the dreadful situations. Perhaps, this notion influenced present results. The tribal society lives in remote areas of Kumaon and these societies are very centralized and surrounded by their own culture. So they are very individual in culture. In contrast, general Kumauni people reside in the society that is collective so, they can learn many skills of behaviour and behaviour modification. Many researchers have also mentioned that cultural individualism was associated with higher emotional expression while economical development was associated with high emotional inventory of both positive and negative emotions. Evidences were associated with the presence of indigenous population self–confidence, confirmation rejection and boredom. It is true that one feels, thinks and behaves and thus, maintain better temperament and positive will being. It is another truth that although participants were selected from remote areas but they had made a good contact with modern societies. Perhaps, they may have experienced their deprivation and it may have caused their emotional disturbance.

Therefore, authors can say that differentials in emotional disturbance and well being may be caused by sub cultural variations. So far as the question of well being was concerned it was apparent that the feeling of positive mental health was not apparently related with materialistic amenities. It is an entirely inner process that emerges from internal satisfaction living in its'

own limitation. If a person finds himself satisfied he does not think to peep in the other door. So, well being is directly related with personal gratification not from the external facilities.

In common observation it appears that people in extreme poverty show average or poor well-being that is close to neutrally or slightly below it. Contrarily, that are wealthier have greater freedom and human rights and emphasis individualism, may be entitled as citizens of higher well-being.

Reports of well-being are higher in those who are individualistic and who are secure for their financial status. The cultural dimensions of individualism versus collectivism produce complex effects. Individualistic cultures are those that emphasize the individual in terms of autonomy whereas in collective culture groups surrounding are more important than the person himself. Thus, individualistic may experience more extreme levels of well-being as compared to the collective societies. In this study general Kumaunies were compared with the tribal societies which is sheer collective so, higher levels of well-being in the front of general Kumaunies was obvious.

Marital Status, Emotional Disturbance, Temperament and Well being

The second notion was related with the impact of marital status on emotional disturbance, temperament and well being. It was found that widows had more sense of emotional disturbance. A close perusal of the Indian society reveals that a woman after death of her husband looses her balance and her emotion control. If she resides in the joint family the survival of life become minimized because due to her family network she finds herself free from many problems. But in case of nuclear family network she finds herself surrounded by many problems. In addition, employed widows face relatively less difficulties as compared to unemployed widows (Kumari, 2005). Since employed women

have their own identity and financial safety they supposed to be more independent and self decision maker as compared to unemployed women. On the other hand employed widow feels social isolation, insecurity and anxiety at several phases of her life. Pande and Shukla (2003) have reported that employed women displayed more emotional control as compared to unemployed. A series of studies done in India as well as in abroad have indicated that the family life of employed women was found more complicated than unemployed women in the society. Since all women were unemployed so, it is surely fair to say that unemployment and widowhood had jointly produced a sense of negative mental health. Thus, nature of sample caused the finding.

Temperament and well being were other features which were influenced by marital status. It was found that husbanded women exhibited more magnitude of sociability, secretiveness, acceptance, sense of responsibility, cooperative behavior and persistence as compared to widow women who were found unrestricted and tough minded and they had low sense of tolerance. Although they had such traits which were commonly presented in all individuals but on the basis of the magnitude it was contended that the positive stream of temperament was shared by husbanded women. Stock, Okerom, Haring and Witter (1983) have indicated that temperament consists of basic dispositions and it is primarily governed by the events and situations. They act as determinant of behaviour. It is true that the situation of widow women is very pathetic still now so, their temperament was generally not so positive. So far as the matter of well being was concerned same story was repeated. Since widow had more magnitude of anxiety and insecurity so, they had displayed less sense of well being.

Age, Emotional, Disturbance, Temperament and Well being

The third interest of the study was to ascertain the pattern of emotional disturbance, temperament and well being as affected

by age. It was contented that young and old women would exhibit disparity in relation to emotional disturbance, temperament and well being. Young women were found highly controlled, tolerant and had higher sense of well being than old ladies.

It is a common fact that after crossing fifty springs of life people generally makes the end of their house hold liabilities. It is the phase when they don't have any worry related either to their employment or their home. This creates fearfulness and sense of insecurity in them. On the one side aging relieves a person from daily routine and on the other hand it causes insecurity and dependency over others. The old people feel neglected by the society because of their past-proneness (*Hamare zamane main to aisa hi hota tha*). This tendency of past orientedness, unsatisfactory attitudes with youngsters and spontaneous preaching system makes them detached from the society. More over, in modern era increase in scientific and technical network has made the people self-centered and less concerned with society. Nuclear family system has taken the place of joint family network. In this condition old people are rarely appreciated in their homes. Perhaps this feeling has aversively influenced the temperament and well-being. Earlier studies had shown that young people were happier than old (Bradburn and Caplovitz, 1965; Kulhern, 1948).

In relatively recent years, a number of researches have virtually found no age effects (Alston, Lowe, Wrigly and 1974; Camren, 1975). Brawn (1977) found that younger respondents reported stronger levels of both positive and negative affect but that older subjects reported greater levels of over all happiness. In most of the studies narrow age –related changes were evinced (Adams 1971; Stock, Okun, Haring and Winter 1983; Larson, 1978; Cameron, 1975). Cambell (1976) has pointed out that the level of satisfaction rises with age, but it seems that positive and negative affects are experienced more intensively by the young. Thus, young persons appear to experience higher levels of joy

but older persons tend to judge their lives in more positive ways. Finding are in consequence with Kumari's (2005) results where emotional control in young age was discussed.

Emotional Disturbance, Temperament and Well-being

The last contention was related with the relationship among emotional disturbance, temperament and well-being. It was found that adverse relationship would prevail everywhere. It states the fact that once a person does not find satisfaction within himself he becomes disturbed mentally. The mental disturbance generates brain storming which distorts the affect of cognitive system. Contrarily, who does not think about worldly pleasures (which he does not have) mental health automatically becomes positive.

Over the last two decades, considerable evidences have accumulated suggesting that stressful life events are linked to low psychological well-being or ill health (e.g. Bhatti and Channabasvanna, 1985; Chandrika and Anantharaman, 1982; Cohen and Williamson, 1991; Kasl and Cooper, 1987; Gautam and Kamal, 1990; Kulhara and Prasad Rao, 1986; Ochaney and Sen, 1987; Pestonjee, 1992) although the stress–illness relation is well–established, yet it is also obvious that all individuals do not respond with health/well-being problems when exposed to major life changes. The magnitude of the stress -illness association is often low, with stress typically accounting for rarely more than 10 per cent of the variance in the illness indicators (Leventhal and Tomarkeen, 1987).

A number of literature reviews and models of occupational stress have also examined the relationship of occupation-specific stressors (job-related SPECs) with the indices of psychological strains like anxiety, depression, job dissatisfaction, burnout etc. (e.g, Brief Scnuler and Vansell , 1980; Fisher, 1989; Ghadially and Kumar, 1989; Prakesh, 1990). Once again, it is seen that the size of the correlations between job–related SPECs and

psychological strains is rather on the lower side. (Jackson and Schuler, 1985; King and King, 1990). All they suggest that there is a large amount of variance still to be accounted for. It is likely that one or more moderator variables contribute to that unaccounted for variance. As a consequence, in recent years the primary research focus has shifted from main effect models to more complex moderator models which assume that stressful experiences have a deleterious impact on well- being, health only under specific personal or situalonal conditions. Further researches can be done with the vision given below :

1. This study can be done in wide coverage. Therefore, males can also be considered with females.
2. Rural–urban variations in relation to emotional disturbance and well-being should be studied.
3. Finally, attempts would be made to modify the status of rural Kumauni women. So, that they can understand themselves, identify them self and cultivate their self-esteem.

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15

Self-Esteem and General Well-Being Amongst Women

Shalini Singh, Sunita Rani and Rajesh Kumar

The women and its problems have been regularly covered by media. In the *Sunday Tribune* dated (25th March,1991) an article on "Working Women and its Problem" was published in which the expectation regarding, the women role have witnessed rapid transformation in recent years. In the current Indian society Indian woman is expected to be multidimensional. Her wide range of activities includes wifehood, motherhood, housekeeping, teaching her children to be a social figure and also in many cases a co-bread earner of the family.

From time immemorial, the role of man has always been regarded as that of a "Provider" in the social unit of home whereas females were taught to regard marriage as the only thing needful. Lately, the process of urbanization and secularization have speeded up the modernization process and the profound social changes, which have been witnessed in recent years have affected women much more than men.

The past two decades have witnessed massive influx of women into the work force. Since independence, however, women have gained an accession of status, both legal and social. There is

no walk of life in which they have not excelled. But it is all in theoretical constructs. Have we ever tried to realize that what type of problems and confusions do they have in relation to their self, self-esteem etc.

Self is a very important concept in people's life, which has been defined in tremendously different ways with its many prefixes and suffixes. The term 'Self' corresponds to its everyday usage in colloquial speech. As such it encompasses the direct feeling, each person has of privileged access to his or her own thoughts, feelings and sensations.

Self-concept is a very broad term, "As it finally evolves, it is made up of all that goes into a person's experiences, it is person's inner world; it is composite of person's thoughts and feelings, strivings and hopes, fear and fantasies; his views of what he or she is, what he/she has been, what he/she might become and his attitudes pertaining to his worth" (Rogers, 1959). This definition shows that self-esteem is an important component of self-concept. A most important attitude each person holds is his/her attitude about self (James, 1890). The sense of personal worth we associate with our self-concept is self-esteem (Atwater, 1983).

The nature of one's self-esteem influences one's characteristics and behavior. The person with high self-esteem is an integrated person with self-confidence and self-respect who experiences competence and happiness (Branden, 1969). He / she is eager to face and excited by new challenges. Cutrona (1982) reported the people with low self-esteem to experience virtually every negative emotion more commonly than those with higher self-esteem.

Self-esteem, in turn, may be associated with a number of indices of mental health like feelings of vulnerability and submissiveness on the negative side and with self acceptance, self respect and satisfaction with life on the positive side. According to Baumeister (1993), Greenberg, Solmon, Pyszezynski,

Rosenblatt, Burling, Lyon, Simonpinel (1992) high self-esteem appears to buffer people against feelings of anxiety, thereby enhancing coping and promoting physical health.

Health, in layman term, is a notion of well-being. It is a function of social, economic, biological, political and cultural factors. In 1948, WHO defined health "as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". This definition has been however criticized because of the difficulty of defining and measuring well-being. According to Jones (1994) "Health is a psychological and Physiological state but it is also fundamentally a social state". The term health is synonym of general well-being. General well-being as a construct refers to the harmonious functioning of the physical as well as the psychological aspect of the personality, giving satisfaction to the self and the society (Verma, Dubey and Gupta, 1988).

Brough and Kelling (2002) reported the direct effect of work-family conflict on individual's well-being. Well-being is a parameter to measure the individual's performance.

Psychological well-being is influenced by the nature of occupation the employee is having, because the occupational specialties vary in their level of overload, decision, authority, challenge and helping others etc. dimensions (Marshall and Singer, 1993).

According to Mann, Michel and Nannek (2004) Self-evaluation is crucial to mental and social well-being. It influences aspirations, personal goals and interaction with others. Results indicate that self-esteem can lead to better health and social behavior, and that poor self-esteem is associated with a broad range of mental disorders and social problems, internalizing problems and externalizing problems. The development of self-esteem, its outcomes and its active protection and promotion are critical to the improvement of both mental and physical health.

METHOD

Sample

A group of 100 married females having an age range of 30-40 yrs. was selected as a sample for the present study. Half of the females (n=50) were working women, i.e. teaching in private schools and rest half (n=50) were house wives.

Tools

The following tools were used for the collection of data

1. *Self-Esteem Inventory:* The inventory was developed by Virk and Chauhan (2003). It consists of 20 items, which measure self-worthiness and personal judgment. The reliability and validity of scale were .83 and .76 respectively.
2. *P. G. I. Health Questionnaire:* The Questionnaire was developed by Verma, Wig and Pershad (1985). It consisted of 38 items divided into A (Physical distress) and B (Psychological distress) sections with 16 and 22 items, respectively. The reliability of the Questionnaire was 0.88 and validity was 0.86.

Procedure

The subjects were informed about the purpose of study after establishing a rapport with them. All the subjects were individually contacted and asked to fill the questionnaires as per instructions given.

RESULTS AND DISCUSSION

The focus of the study was to make comparison between working and non-working women on variables of self-esteem and General well-being.

The data was analyzed by calculating the means and standard deviations of the scores obtained by two groups of women, and t-

test was used to find out the significant difference between means obtained on self-esteem and general well being (Table 1) between housewives and working women.

TABLE-1

Means and standards deviations scores of working women and housewives. (N=100).

Variables	*Working women*		*House Wives*		*t-score*
	Mean	*SD*	*Mean*	*SD*	
Self - Esteem	16.10	3.13	13.96	2.35	3.89*
General Well Being	29.84	6.98	24.54	5.25	4.31*

* P< .01

Table 1 shows that working women were having higher scores on self-esteem (i.e. Mean 16.1 and SD 3.13) as well as well-being (i.e. mean 29.84 and SD 6.98). On the other hand, housewives were found low on self-esteem (i.e. mean 13.69 and SD 2.35) and also on well being (i.e. mean 24.54 and SD 5.25). The t values of group indicated significant differences between working women and housewives i.e. value of t 3.89 on self - esteem and 4.31 on well-being (P< .01). Thus the obtained results exhibit high scores on well-being and self-esteem.

It may be due to the fact that working women, being employed had frequent contact with co-workers and external world which could provide social support, as well as opportunities that may enhance her self-esteem and sense of control. High self-esteem in turn promotes positive affect ("feel" good about one self) by buffering them against stress and other negative emotions, by enhancing personal adjustment, coping and by promoting physical health (Baumeister, 1993).

The results have been supported by Nathawat and Mathur, (1993) who found women employed outside the home having higher self-esteem than those who were not employed. Similarly, Gove and Zeiss (1987) also related paid employment to increased self-esteem in working women.

As housewives have primary responsibility for house work and child care it leads to low-self esteem and well-being. A lack of structure and legitimization for setting limits on one's tasks are more characteristic of women at home than of employed women (Singh and Mediratta, 2005).

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16

Anxiety and Depression Among Aged Eritrean Women

Anita Shrivastava and Semhar Mihreteab

Aging a complex process, which every one experience at some time of life. It is complex because of its many facets-psychological, emotional, cognitive, and interpersonal changes that influences social functioning and well being. As per Perlmutter "Aging is an individual process that occurs at different rates in different people and socio-psychological factors may accelerate the physiological changes" (Perlmutter and Hall, 1985). Most of the problems the aged experience is due to the failure to adapt to these life changes.

Aging is common among men and women. But women usually age faster. In many parts of the world, especially where the social norms forces young girls to get married to older man, higher proportion of women are widows. Among such women, poor older women who are childless or whose children moved away are vulnerable in many ways. Also, the more dependent they were on their spouses' greater difficulty they face in terms of general adjustment.

Elderly encounter a number of problems, and among them loss of family and close friends commonly creates severe emotional disturbances. Loss is the predominant theme that

characterizes the emotional experience of older people. Living alone is a major stressor that affects about 10% older population. For both gender likelihood of living alone increases with age (Kaplan and Sadock, 1998).

Among all emotional problems depression is most common disturbance problem experienced by aged population. The suicide rate of white men in their 80's is three times higher as that of men in general (Zastrow, 1996). Depression is reported to be present in 15% of all older adults. Age itself is not a risk but being widowed and having chronic medical illnesses are associated with vulnerability to develop depressive disorders (Kaplan and Sadock, 1998).

The association between depression and an increased risk of death in elderly persons has been established in both clinical and community studies. Co-occurrence of depression and generalized anxiety has been shown to represent more severe and more chronic psychopathology (Holwerda, Schoevers, Dekker, Deeg, Jonker and Beekman, 2006). The national institution on aging estimates that at least 15% of people over 65 year of age suffer from some degree of depression that impairs the quality of their lives. Women were generally more likely than men to have feelings of depression (Nevid, 1997). In another study conducted by Licht-Strunk, Kooij, Schaik, Marwijk, Hout, Haan and Beekman (2005) found depressed patients being older, and more often female.

Next to depression, anxiety is also a predominant emotional problem of elderly. The fragility of autonomic nervous system in older people may account for the development of anxiety, after a major stress. Because of concurrent physical disabilities, older people react more severely to stress than younger people (Kaplan and Sadock, 1998). Researchers agree that about 10 percent of older adult reports come in form of anxiety disorders (Hamilton, 2000).

Elders are victim of various psychosocial problems not only because of aging but also due to factors like retirement, loss of children or loved one's and other life crises. Women have higher longevity than men do and they are more susceptible to many psychological problems. Eritrea is a North-Eastern African country where due to constant war there is a higher older population and majority of them are women. These women have lost their children, spouses in war and many are left without any close member to depend upon. Many such women have no one who can take care of them, and are forced to stay in home for elderly. In a stage of life when they need maximum support, they are pushed by socio-political circumstances to live at their own, deprived of any close family network. Unlike other part of the globe, the scientific investigation about the prevalent emotional disturbances among homeless women has not taken up in Eritrea.

In the light of above stated observation, the present investigation has been taken up with following objectives:

1. To assess the manifestation of anxiety and depression among old aged Eritrean women living with and without close family members.
2. To find out possible relationship between depression and living status of old aged Eritrean women.

METHOD

Sample

The subject population of this research comprises of 30 old aged women. Out of these 30 subjects 15 women were taken from Geza Keinsha Home for elderly, and the other 15 women were drawn from Tasedachristian- a village near Asmara, Eritrea. The sample was drawn using proportionate sampling. Those women, who were above 65 years of age and either taken care by Evangelical church or by close family members were included.

Those subjects who have past history of known psychiatric and neuropsychological disorders and below 65 years were excluded.

Tools

Following standardized Questionnaires were used to collect data:

General Health Questionnaire (GHQ): The General Health Questionnaire consists of 12 items that can be scored on 4 point scale such as not at all; same as usual; rather more than usual; and much more than usual. The cut off point is two and above.

Beck Depression Inventory (BDI): The inventory includes 21 items rated on four point scale. The score ranges from 0 to 63. An obtained score from 0-9 indicate normal non-depressed state, 10-18 indicate mild 19-23 moderate, and 30-63 severe level of depression respectively.

Hamilton Anxiety Scale (HAS): Hamilton scale comprises of 14 items rated on five point scale wherein 0 represents not present; 1-mild; 2-moderate; 3-severe level presence of symptom.

Procedure

The organizer of Geza Kenisha Home for Elderly was contacted personally and the required permission for data collection was obtained. Fifteen women who aged 65 years and above and who were not suffering from any known psychiatric/ neurological disorders were selected from Geza Kenisha Home for Elderly. Using similar criteria 15 women were selected from Tsaedachristian. The main purpose of research was explained to them and informed consent was obtained from the subjects. Each subject was contacted personally and GHQ was administered. Those who obtained above cut of point i.e. 2 on GHQ were included for the second phase of research. These screened 24

subjects were further assessed on Beck Depression Inventory and Hamilton Anxiety Scale.

RESULTS AND DISCUSSION

Depression and anxiety are common conditions that almost all people experience in relatively mild form during the course of their life. This experience becomes severe in later life due to stressful and negative events. Living alone had been stated by many researchers a major stressor that affects the people, reduces their ability to cope-up and subject them to variety of physical and psychological ailments.

In Eritrea, the constant war have resulted in displacement of many nationals, forced social isolation, loss of near and dear ones. Many women who are in their prime old age have lost their children and spouses in war and are left with no one to be with. Ironically when they need the social support of close family members most due to their failing health, deteriorating physical and mental capacity as the result of advanced age, they are deprived of any such emotional nit and are forced to stay in homes run by NGO. This study is taken upon 30 women who age 65 years and above, live either alone in home for elderly or with close family members. These women were screened on General Health Questionnaire and those who scored 2 and above were assessed using Beck Depression Inventory and Hamilton Anxiety Scale.

The obtained data from the administered instruments was analyzed using percentage and correlation. Percentage was calculated to assess the level of anxiety and depression among studied subjects. The correlation was computed to find out the existing relationship between the status (staying with family and living alone) of studied subjects and level of depression.

The results showed that 66.6% women, who were living alone, have severe level of depression followed by 33.3% having

moderate level of depression. However, none of them reported having normal mood.

Among women who were living with their families majority (75%) had moderate level of depression and very small percentage of women (16.6%) had severe depression. Out of 12 women only one woman (8.3%) reported mild level of depression.

As shown, the women who live alone has moderate to very severe level of anxiety reflecting in anxious mood, tension, fear, insomnia, somatic manifestation. The highest anxiety is reflected in somatic manifestation (50%) followed by depressed mood (41%). On an average the data shows that most of the lonely women have significant level of anxiety.

Contrary to the lonely women, the women staying with close family members have depicted mild to moderate level of anxiety. Therefore the anxiety is a common symptom experienced by women of both statuses, however, the severity/intensity level of anxiety is more sever among women who live alone.

The findings related to the level of depression among lonely women suggest that majority of these women have moderate (33.3%) to severe (66.6%) level of depression. Further findings suggest that normal mood or mild level of depression is non-existent among these women. The findings are in agreement with the Nevid (1984), who reported the National Institution Survey on Aging which suggest at least 15% of old aged population suffer with various level of depression. As per this survey lonely women are more susceptible to have severe level of depression. Present findings are further in agreement with Kaplan and Sadock (1998), who reported that living alone is a major stress that affects about 10% of elderly people and rates of depression is higher among elder residents of nursing home. The findings of Plaisier, de Bruijn, de Graaf, Have, Beekman and Penninx BW (2007) found that social support protected against the incidence of depressive and anxiety disorders also support author's findings.

The findings of present research suggest that women who live with close family members have mild degree of depression (8.3%) whereas the severity level is more among women who are living alone (66%). This indicates that since the lonely women have more problems, they mostly scored high between moderate and severe depression.

The findings of present research further suggest that women who live with close family relative also have mild (8.3%) to moderate (75%) level of depression, therefore, depression seems to be common emotional disturbance of old aged population. The findings are supported by the data collected by Copeland, Beekman, Braam, Dewey, Delespaul, Fuhrer Hooijer, Lawlor, Kivela, Lobo A, Magnusson, Mann, Meller, Prince, Reischies, Roelands, Skoog, Turrina, de Vries and Wilson KC (2004), from nine centers in Europe which had used the Geriatric Mental Scale (GMS) AGECAT and compared prevalence of diagnoses in subjects aged 65 years and over living in the community. Levels of depressive illness were: Iceland 8.8%, Liverpool 10.0%; Zaragoza 10.7%; Dublin 11.9%; Amsterdam 12.0%; Berlin 16.5%; London 17.3%; Verona 18.3% and Munich 23.6%. Meta-analysis of all 13,808 subjects yielded a mean level of depression of 12.3% (95% CI 11.8-12.9), 14.1% for women (95% CI 13.5-14.8). The findings are futher in agreement with the review study conducted by Licht-Strunk, van der Windt, van Marwijk, de Haan and Beekman (2007), who found strong evidence for an association of baseline depression level, older age, external locus of control, somatic co-morbidity and functional limitations with persistent depression. Within the older population, age seems to be a negative prognostic factor, while older people are more likely to be exposed to most of the other prognostic factors identified.

Next to depression, anxiety is the second most prevalent problem. Present findings show that about 50% of lonely aged women reflected severe level of anxiety compare to the moderate level anxiety level of aged women who live with close family

members. The findings are in disagreement with Smayer and Quails (1999) who reported anxiety is relatively rare among older adults compare to younger ones. However, the findings are in agreement with Hamilton (2000) who reported that 10% of older reports come in the form of anxiety disorders. The findings are supported by the study conducted by Schuurmans, Comijs, Beekman, de Beurs, Deeg, Emmelkamp and van Dyck (2005) who found, six years after baseline, 23% of their sample met the criteria for an anxiety disorder. Another 47% suffered from sub clinical anxiety symptoms.

The findings of present research also showed that the living status of old aged women of Entreat was positively related with having depression ($r = 0.72$). The Eritrean women living alone were more susceptible to suffer with depression. These findings can be explained with perspective and current socio-political situation of Eritrea. The aftermaths of longstanding War has resulted in various disasters and have forced many old aged women to live alone. Eritrea is a society wherein the social bondage and ties are strong and the concept of sharing with close ones are integral part. Most of the elders are taken care by their grownup children and deprivation of such social securities is natural to result in severe emotional disturbances. The findings of present study are in agreement with Minardi and Blanchard (2004) who found significant associations between depression and loneliness, and depression and satisfaction with life.

Findings of present investigation are once again in agreement with Nevid (1997), and Kaplan and Sadock (1998). From the obtained results and discussion it can be concluded that Depression is a common problem of old aged Eritrean women, the severity level of depression and anxiety is higher among those old aged women who are living alone in the Home for elderly and the depression is positively related with the living status of old aged Eritrean women.

The findings of present research highlights the need to provide necessary psycho-social intervention for those old aged women who have lost their close members and are living alone in the home for elderly women.

Comparatively small size of sample has restrained the generalization of present findings to other Eritrean old aged women. Due to time limitation other factors such as life events, attitude of young generation towards older person could not be included in the present study.

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SECTION IV

DOUBLE BURDEN EFFECTS

17

Correlates and Management of Stress Among Working Women

Dhanalakshmi D.

The nature of work has gone through radical changes over the last century and it is still changing at tumultuous speed. During the last two decades, women's participation in the paid labour force has increased spectacularly. Women have achieved parity with men in terms of workforce involvement. This dramatic social change has taken researchers from a variety of standpoints quickly on the heels to explore its impact on the well-being of contemporary families. Researchers have also examined the effect of women's multiple roles on their own physical and mental health (Long and Kahn, 1993). Researchers interested in the impact of multiple roles on women's well-being initially assumed that paid work brought new stresses into women's lives and, consequently, would be linked to negative health outcomes (Sears and Galambos, 1993). Yet, a number of studies indicate that multiple roles confer benefits to women's physical and mental health (Barnett, 1993; Green and Russo, 1993; Sears and Galambos, 1993). Although multiple roles for women produce a number of benefits, certain work conditions are deleterious to women's well-being (Repetti, Matthews and Waldron, 1989).

Stressors may be acute, sequential, episodic, chronically intermittent, sustained, or anticipated (Sapolsky, Romero and Munck, 2000). Research indicates that these stressors may have a negative impact on health and well-being above and beyond the effects of general job stressors (work overload, skill underutilization, etc). More employed women than men have reported high levels of stress and stress-related illnesses, (Work Trends Survey, 1999) and 60% of the women respondents reported that job stress was their number-one problem. (Reich and Nussbaum, 1994).

Stress Defined

Stress by definition, is the body's response physiologically and psychologically to a "dangerous situation", it stands to reason that what is perceived as dangerous in the workplace is very individual. Research shows that women's stress in the workplace is related more to lack of balance and demands of home and work combined, and men's workplace stress related more to the job.

Consequences of Stress

Stress can lead to physical health problems such as ulcers, gastro-enteritis, high blood pressure, CHD, muscular tensions etc. Stress can also result in mental health problems such as depression, anxiety and panic attacks. Stress can increase the susceptibility to substance abuse and related illnesses. These physiological and psychological effects can lead to problems in the workplace such as absenteeism, decreased work productivity etc.

Stress and its Impact on Health

Working mothers face higher stress levels and possibly adverse health effects, most likely because they bear a greater and more diffuse workload than men/other women. The most commonly reported symptoms in women are depressive symptoms,

symptoms of bodily tension and chronic pain from muscles and joints. (Krantz and Ostergren, 2000).

Several studies have explored the well-being of women and the stress they experience at the work front (Amatea and Fong, 1991; Jenkins, 1997; Lennon, 1994; Lennon and Rosenfeld, 1992; Nelson and Burke, 2000; Sherr and Lawrence, 2000). Previous studies have indiscriminately seen mental health and illness where it has been found that mental illness is more common among women (Chakraborty, 1990; Isaac and Kapur, 1980). Women who perceived higher overload in home-tasks reported also higher levels of anxiety, depression and a lower self-esteem. (Blanco and Feldman, 2000). Women shouldering great domestic responsibility or who experienced job strain were at risk of a high level of common physical and mental symptoms. (Krantz and Ostergren, 2000). These results indicate the negative effects of household labor on the health in working women.

Dual Role of Working Women

Working women face the problems of combined work at home and at office. This is the major stressor for women. Women do paid work in addition to the responsibility of child-care and housework. This induces undue amounts of stress on the individual. Women who report high spousal care time commitment and few social ties experience a dramatic elevation in depressive symptoms, compared to women with no spousal care responsibilities and many social ties. (Cannuscio, Colditz, Rimm, Berkman, Jones and Kawachi, 2004). Even though these working women are busy working outside their home, their roles as a mother and wife still prevail. Having a full time job would mean finding substitutes to perform unpaid commitments such as household chores (Ahmad, 1995) and childcare tasks (Ahmad. 1996).

Studies have found that high psychological demands, low decision latitude and low social support significantly predict

depression. (Niedhammer, Goldberg, Leclerc, Bugel and David, 1998).

Women experience more stress because of the dual responsibilities. They show more job dissatisfaction and also suffer from poor mental health and physical health. (Bogg and Cooper, 1998).

Psychosocial work environment is an important determinant of health status among working women. High strain work is associated with lower vitality, mental health, higher pain and overall lower health status. (Amick, Kawachi, Coakley, Lerner, Levine and Colditz, 1998).

Physical demands of work are related to depressed mood but are felt more strongly among employed women as opposed to home makers. (Lombardi and Ulrich, 1997).

Working Women and Stress

Women continue meeting household and family responsibilities, while at the same time working and trying to maintain personal interests. Women either view these roles as challenges, or they perceive them as threats. As demands increase to fulfill these roles, women often feel a sense of losing control and helplessness, making them prone to stress and burnout.

Many women face difficult challenges and responsibilities that may overlap or conflict, causing stress that can affect their health. As women have become more assimilated into the work-force over recent decades, they have realized considerable changes in their work roles which may contribute to health problems and other negative outcomes such as marital strain and diminished job status. Many women are discovering the problems of having a job. Having to cope with dual role responsibilities seems highly stressful for the career woman. Most hold low-level positions that involve high demand and low control, a combination that is

inherently stressful. Women are sexually harrassed at their workplaces. Even in the best of jobs, women are still subject to discrimination, especially in the area of salaries, job demands etc.

Heavy workloads may adversely affect women's health, especially in the presence of certain role characteristics (e.g., having a clerical, managerial, professional, or executive position, or caring for young children). Heavy work responsibilities may also undermine marital happiness, particularly if there is perceived inequity in the way partners share household work. Finally, women's total work responsibilities often impact their careers due to compensatory reductions in work commitment and job status. (Gjerdingen, McGovern, Bekker, Lundberg and Willemsen, 2003). Work related factors, such as non-employment and job strain, and circumstances within the private sphere, such as social network/support, seem equally important for middle aged women's health status.(Krantz and Ostergren, 2000).

Work Family Conflict

Work family conflict is significantly and positively related to depression, poor physical health and heavy alcohol use. (Frone, Russell and Barnes, 1996).

Work Risk Factors

There are a number of factors that contribute to workplace stress. These factors include a toxic work environment, negative workload, isolation, types of hours worked, role conflict, role ambiguity, lack of autonomy, career development barriers, difficult relationships with administrators and/or coworkers, managerial bullying, harassment, and organizational climate. Many jobs in the present world, because of the advancements in all perspectives are stressful. Work stress can also lead to harassment/ even violence while on the job and also increase in psychosomatic complaints and absenteeism. (Godin and Kittel, 2004).

Working Conditions and Impact on Health

Poor working conditions may be an important source of stress and may therefore contribute to the development of certain stress related disorders. Research concerning women's roles and health has revealed inconsistencies regarding the effects of work/ family roles on women's health. Role factors may affect health by increasing or decreasing one's perceptions of personal control over life. It has been found that employment is the only role associated with health, and perceived control does modify this relationship slightly. Both high and low quality employment roles predict better health, whereas only high quality marital roles predict better health. While perceived control does mediate slightly the effects of job quality on health, the positive effects of marital status on health are suppressed slightly by perceived control. (Buller, 1994).

Brown and Harris (1978) found depression to be more prevalent among working-class than middle class women living in London. There is evidence that poor women experience more and more severe life events than does the general population (Makosky, 1982); they are more likely to have to deal with chronic sources of social stress such as low quality housing and dangerous neighborhoods (Makosky, 1982). Women are also at higher risk for becoming victims of violence (Belle, 1990); and they are especially vulnerable to encountering problems in parenting and child care (Belle, 1990). In fact, social networks can represent additional stress for poor women as well as sources of support (Belle, 1990). This gender difference has led some to contend that men tend to externalize their suffering through substance abuse and aggressive behavior, resulting in an under-reporting of psychological distress. Women, in turn, more often suffer distress in the form of depression, anxiety, "nerves," and the like.

Poor psychosocial conditions related to working life, as well as to the combined impact of paid and unpaid work were revealed

to be risk factors for poor self-reported health among middle-aged women. These results highlight the need for improving women's work conditions, as well as designing family policies that promote a better sharing of unpaid household tasks and responsibilities between spouses. (Mellner, Krantz and Lundberg, 2006).

Work related stress alone may be deficient as a forecaster of health risk. Women are involved in many roles simultaneously, (mother, wife, etc). A consideration of these multiple roles occupied by women is absolutely essential as it could be the interaction of these roles that is relevant to their health benefits or risks of employment. Kessler and McRae (1982) reported that the positive mental health benefit of employment for women was reduced for mothers with dependent children at home.

Stress and Personality

Theories have linked various stressors with health problems, and some studies have identified personality traits that enhance health. However, few studies have examined the interaction among women's stressors, personality traits and their health. Type A women had higher occupational levels and reported more demanding jobs and higher stress and tension than Type B women. (Kelly and Houston, 1985). Research has identified a number of differences between working women and housewives regarding their life stress, state-trait anxiety, locus of control, Type A behaviour and personal efficacy. (Kumari and Singh, 2000).

Social Network

The lack of an established network of family and friends predisposes one to stress disorder and stress related health problems. Social support protects against the incidence of depressive and anxiety disorders. This effect is stronger for men compared to women. Social support did not buffer the unfavorable

mental effect of working conditions. (Plaisier, Bruijn, Graaf, Have, Beekman and Penninx, 2007). People who maintain active relationships with their adult children are buffered against the adverse health effects of chronic stress- inducing situations. Women who lack good social support may not be able to discuss their negative feelings and are unable to relieve their stress. This results in stress related problems.

Social support does the best job of protecting people from the effects of stress when they believe that emotional support is easy to come by and one have at least one person where one can confide in. (Cohen, Underwood and Gottlieb, 2000)

Ways to Cope with Stress

Women need to understand stress, recognize warning signs, and develop coping skills to maintain health in all dimensions of their lives. Occupational stress interventions may consist of training in coping strategies, progressive relaxation, or other stress management techniques, the goal of which is to help the worker deal more effectively with occupational stress. (Sauter, Lim and Murphy, 1996). Some stress management programs have been shown to be effective in reducing symptoms of stress, (Koeske, Kirk, Koeske, 1993, Martin, 1992, Murphy, 1996). The most effective way of reducing occupational stress is to eliminate the stressors through organizational and job redesign interventions. Effective forms of job redesign include increasing job control by allowing workers to participate in decision making, increasing skill use by expanding job activities, and reducing work role conflict by clarifying job roles and responsibilities. (Kelloway and Gottlieb, 1998).

Attitudes can also be adopted and changed in order to cope with the demands of multiple roles. Hall (1972) identifies 3 types of coping behaviour for dealing with interrole conflict: Type I coping (structural role redefinition); Type II coping (personal

role redefinition); and Type III coping (reactive role behaviour). Type I coping (structural role definition) involves 'redefining the expectations held by other people so that fewer conflicting demands are placed upon the person'. Type II coping (personal role redefinition) involves 'changing the person's perceptions of his or her role demands rather than attempting to change the environment'. Type III coping (reactive role behaviour) involves 'attempts whose aim is to meet all of the role demands experienced'.

There is an increasing need for working women to establish/ reinforce a network of friends at home and at work. Workplace and social supports are critical for women to improve their economic status and career development, address their own health concerns and meet their families' health needs.

By restructuring priorities and eliminating tasks that are unnecessary, working women may be able to reduce the stress levels experienced by them to a very great extent.

Exercise can be an effective distraction from stressful events. Relaxation techniques such as deep breathing procedures, muscle relaxation, bio-feedback, massage therapy etc, may help in relieving stress. Relaxation lowers blood pressure, respiration, and pulse rates, releases muscle tension, and eases emotional strains. This response is highly individualized, but there are certain approaches that seem to work.

Cognitive-behavioral methods are the most effective ways to reduce stress. They include identifying sources of stress, restructuring priorities, changing one's response to stress, and finding methods for managing and reducing stress.

Further research is needed on the effects of multiple role stress on women's health. It is important that research address the physiologic, psychosocial, and economic factors that together affect women's health status. Although many strategies do exist

by which stress can be relieved, women have been experiencing health problems. In order to reduce these problems future directions for women's health research are suggested, along with addition of an empowerment model of health.

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18

Life Satisfaction and Helplessness in Working and Non-working Women: A Cross-cultural Comparison

Waheeda Khan and N. Sumila Devi

Life satisfaction refers to "psychological well-being" of the individual, which includes mental functioning (e.g. mental alertness, intact memory), subjective perceived well-being (e.g. happiness, morale) and the absence of psychopathology (e.g. depression). The terms life satisfaction, morale and happiness are often used inter-changeably to refer to well being, yet these constructs widely vary in meaning. George (1981) defined life satisfaction as a cognitive process by which an individual assesses his/her progress towards desired goals, happiness as transitory moods of gaiety or euphoria reflecting the affect that people feel towards their current state of affairs and morale as a fit between the individual and the environment, the acceptance of those aspects of life that cannot be changed and more generally, how positive one's outlook on life is.

Neugarten, Havighurst, and Tobin (1961) state that zest, resolution and fortitude, congruence between desired and achieved goals; positive self-concept and mood constitute the psychological

concept of life satisfaction. These can also be used as indicators of successful aging. He further elaborated two approaches to life satisfaction. The first one focuses upon the overt behavior of the individual and uses social criteria of success or competence and the second approach is the individual's internal frame i.e., the individual's own interpretation and evaluation of his present or past life, his satisfaction or his happiness. The former approach gives out variables like level and range of activities and extent of social participation, the latter approach studies variables like satisfaction levels and self-concept of the individual.

The degree to which cognitive processes, such as aspiration with others (or with another period of time) are engaged by the measure of well-being are also important (Michalos, 1982). Happiness ratings have a higher ratio of affective to cognitive features compared with most satisfaction measures. There is some evidence that happiness ratings do yield lower correlations with reporter's health than satisfaction ratings (Costa and McCrae, 1980). Palmore and Kivelt (1977) found that the best predictor of life satisfaction is the person's rating of life satisfaction in the past and that initial values or changes in other variables appeared to be unrelated to the changes in life satisfaction. Thus, life satisfaction as a concept can be defined according to health status (Palmore and Luikart, 1972), social variables like income level, family satisfaction and organizational activity also. Therefore, most accepted definition of life satisfaction is that it refers to psychological well-being.

Health could affect life satisfaction directly, possibly but either enhancing the self-concept of those in good health, or, for those in poor health, lower self esteem and / or diminish the pleasure derived through activities resulting from chronic pain (such as that experienced by arthritis sufferers) or from worry. Health, therefore, may influence life satisfaction by restricting activity. Traves and Hanson (1962) stated that health problems

appear to detract from enjoying number of close friendships, satisfaction with work and satisfaction with family.

Researchers have shown that life satisfaction may also affect health when a person is dissatisfied with life, it means that he / she is experiencing negative emotions that are coloring the view of the world around him / her. There may also be relative lack of positive feeling states. Such dissatisfaction means important needs and expectations are not being met (Lawton, 1983). For example, researchers have suggested that persons who do not receive the social support they need, experience psychological and physiological strain. This strain would be reflected in lower ratings of life satisfaction for unsupported groups. Stressful events that are associated often with physical symptoms have shown lower life satisfaction in number of studies (Zautra, Beier and Chappel, 1977).

Medley (1976) gave a model depicting a causative chain between financial situation, health satisfaction with standard of living, satisfaction with family life and satisfaction with life as whole. Satisfaction with family was found to make the greatest impact on life satisfaction. The model was determined to be generally consistent. Liang (1982) proposed a basic life satisfaction model and concluded that life satisfaction is positively and directly influenced by health, financial satisfaction and subjective integration. Socio economic status and objective social integrations are postulated to affect life satisfaction indirectly. Theorists believe that high levels of life satisfaction are associated with the agent's reducing of the number and importance of their roles.

Marianne (1993) examined the impact that multiple roles (work / family) on occupational adjustment and life satisfaction, using 50 female health professionals (aged 25-57 yrs). Results indicated some evidence that as the number of occupational roles increased, life satisfaction scores tended to decrease; however, as

the number of family roles increased, scores on occupational adjustment and life satisfaction scales tended to increase.

The concept of helplessness was developed by Seligman (1975) in his behavioral theory of depression, an important factor in the perception of potentially stressful situations. Helplessness is similar to an external orientation in that who is helpless and believes that no matter what he dose, unable to control his reinforcements. Seligman noted that one can also learn that whatever responses one makes has no effect obtaining reward, provided the situation or environment is 'arranged' to operate in his way.

The research suggests that 'external' people could be helped to develop adequate coping mechanisms. A similar point can be made to the people who demonstrate a relative helplessness, people who feel to have no control over their environment.

Seligman's (1975) learned - helplessness theory of depression suggests that although anxiety is the initial response to a stressful situation, it is replaced by depression if the person comes to believe that control is unattainable. In some ways this model is similar to the ego analytical view of Bibring (1953), who proposed that depression follows "the ego's shocking awareness of its helplessness in regard to its aspirations". A revised version of the learned helplessness model suggested for several inadequacies of the theory and unexplained aspects of depression. Some studies with humans, for example had indicated that "helplessness inductions" actually led to subsequent facilitation of performance (e.g. Wortman and Brehm, 1995). In addition, many depressed people hold themselves responsible for their failures. The essence of the revised theory lies in the concept of attribution and in this way it blends cognitive and learning elements. Seligman attempted to document the similarity between learned helplessness and "reactive depression", but Depue and Monroe (1978) have demonstrated that learned helplessness resembles the symptoms

of a bipolar patient in a depressive episode more than it dose those of any form of unipolar depression.

Therefore, on the basis of above review of literature, the purpose of the present research was selected to examine the role of life satisfaction and helplessness in working and non-working women belonging to two different cultural background. It was hypothesized that working and non-working women of different age groups residing in two cultures i.e. U.P and Manipur, would show differences in their perceived life satisfaction and helplessness. The following are the main objectives:

1. To study life satisfaction and helplessness in working and non-working women.
2. To study life satisfaction and helplessness in young and old women.
3. To study life satisfaction and helplessness in women belonging to Delhi and Manipur.
4. To study between group (Delhi vs Manipur) differences in working and non-working women on the measures of life satisfaction and helplessness.
5. To study between group (Delhi vs Manipur) differences in young and old women on the measures of life satisfaction and helplessness.
6. To study between group (young vs old) differences in working and non-working women of on the measures of life satisfaction and helplessness.
7. To study between group differences separately in each culture group.

METHOD

Sample

The details concerning the sample are given in table-1. Total sample of 160 subjects was equally divided into two groups i.e.

Delhi and Manipur. It was further divided in two categories i.e. working and non-working. These two categories included young (21-30 years) and old (40-65 years) working and non-working women. All the subjects were literate and randomly selected from amongst the married and unmarried groups.

TABLE 1

Number of young, old, working and non-working women belonging to Delhi and Manipur

Age/Status	*Delhi*		*Manipur*		
	Working	*Non-working*	*Working*	*Non-working*	*Total*
Young	20	20	20	20	80
Old	20	20	20	20	80
Total	40	40	40	40	160

Tools

The following measuring tools were used:

Life Satisfaction Scale (Chadha (1995) measures attitudes people have towards their performance and toward others. It comprises 27 items, based on five point rating, ranging from strongly disagree to strongly agree. Scores are assigned 1-7 or vise-versa, higher the scores of the subjects higher will be his/her life satisfaction. It is a standardized, reliable (0.87) and valid (0.82) test.

Helplessness scale (Chadha (1995) has six statements and there are five response categories namely strongly agree, agree, undecided, disagree and strongly disagree. The scores are assigned from 5-1, the higher the score, the greater will be the helplessness. The reported reliability of the scale is 0.87.

Procedure

Life satisfaction and helplessness scales were individually administered as per the sample requirement. All women were

assured about the confidentially, proper rapport was established after getting consent from each respondent. Appropriate instructions were given and subjects were asked to give their first impressions and whatever is true and best describes the way they feel, should be reported.

RESULTS AND DISCUSSION

Group differences were analyzed using t-test. The detailed results of various group comparisons are presented in tables 2 to 5. Table-2 shows group comparisons between Delhi and Manipur; working and non-working; and young and old subjects on the measures of life satisfaction and helplessness.

TABLE 2

Mean, SD, SED and t-values of life satisfaction and helplessness for total sample and various groups (df=158).

Life Satisfaction	*Delhi*	*Manipur*	*Working*	*Non-working*	*Young*	*Old*
Mean	129.46	134.26	136.02	127.70	132.21	131.50
SD	18.04	25.84	20.99	23.01	18.67	25.60
SED	4.07	8.35	5.51	6.61	4.35	8.20
t-values	1.36		2.38*		0.20	
Helplessness	*Delhi*	*Manipur*	*Working*	*Non-working*	*Young*	*Old*
Mean	16.6	15.76	14.36	18.00	15.16	17.2
SD	3.58	4.04	3.25	3.51	3.15	4.18
SED	0.16	0.21	0.13	0.15	0.12	0.22
t- values	1.41		6.82**		3.50**	

*p<.05; **p<.01

Table-2 shows that there is no significant difference between Delhi and Manipur on both the measures of life satisfaction and helplessness. However, mean comparisons between working and non-working women are significant on both the dependent

measures, indicating that working women have more life satisfaction but less helplessness as compared to non-working women. Age comparisons revealed that older women reported more helplessness in comparison to younger ones but the difference between young and old was not significant on the measures of life satisfaction.

TABLE 3

Mean, SD, SED and t- values of life satisfaction and helplessness for working and Non-working women of Delhi and Manipur (df=76).

Life Satisfaction	*Delhi*		*Manipur*	
	Working	*Non- working*	*Working*	*Non- working*
Mean	133.75	125.65	138.75	129.75
SD	17.60	17.80	23.76	27.32
SED	7.7	7.9	14.1	18.60
t- values	1.92		1.57	
Helplessness	*Working*	*Non- working*	*Working*	*Non- working*
Mean	14.45	18.45	13.97	17.55
SD	3.26	2.89	3.23	4.01
SED	0.27	0.21	0.26	0.41
t- values	5.44**		4.33**	

*p<.05; **p<.01

Inspection of table-3 revealed mean comparisons between working and non-working women belonging to Delhi and Manipur separately. Differences between these two groups on the measure of life satisfaction were insignificant in women belonging to both Delhi and Manipur, however working and non working differed significantly on the measure of helplessness showing the similar trend in Delhi and Manipur i.e. non-working women experienced more helplessness in their day-to-day life, as compared to working women.

TABLE-4

Mean, SD, SED t-values of life satisfaction and helplessness for young and old women belonging to Delhi and Manipur (df=76).

Life Satisfaction	*Delhi*		*Manipur*	
	Young	*Old*	*Young*	*Old*
Mean	126.67	132.25	138.99	130.77
SD	15.80	19.83	24.80	30.50
SED	6.24	9.83	15.30	23.50
t- values	1.39		1.33	
Helplessness	*Young*	*Old*	*Young*	*Old*
Mean	15.95	17.25	14.37	17.15
SD	3.38	5.22	2.72	4.66
SED	0.28	0.68	0.18	0.54
t- values	0.15		3.25**	

*p<.05; **p<.01

In table-4 group comparisons in young vs old women belonging to Delhi and Manipur are presented. Comparisons between young and old women belonging to Delhi state did not yield significant differences on both the measures of life satisfaction and helplessness. On the other hand in the state of Manipur, young and old women showed significant differences on the measure of helplessness, indicating that old women experienced more helplessness as compared to young ones.

Table-5 shows mean comparisons of young vs old, separately for working and non-working women of Delhi and Manipur. On the measure of helplessness, significant differences between young and old women were obtained in case of non-working women only. The similar trend was observed both in Delhi and Manipur i.e. older women experienced more helplessness than younger ones on the measure of life satisfaction; except one, all other comparisons yielded insignificant results i.e. young non-working

women of Manipur reported significantly more life satisfaction in comparison to their counterparts.

TABLE 5

Mean, SD SED and t- values of life satisfaction and helplessness for Young and Old; working and non-working women belonging to Delhi and Manipur (df=38).

Life satisfaction	*Delhi working*		*Delhi Non-working*	
	Young	*Old*	*Young*	*Old*
Mean	130.95	135.60	122.4	128.9
SD	15.51	19.73	14.90	19.35
SED	12.1	19.50	11.1	18.7
t- values	0.83		1.19	
Helplessness	*Young*	*Old*	*Young*	*Old*
Mean	14.4	15.1	17.5	19.5
SD	3.15	3.42	2.93	2.60
SED	0.49	0.58	0.31	0.34
t- values	0.67		2.50*	
Life Satisfaction	*Manipur Working*		*Manipur Non-working*	
	Young	*Old*	*Young*	*Old*
Mean	132.76	144.8	142.80	116.76
SD	23.27	22.04	13.02	30.66
SED	13.50	12.14	8.70	47.10
t-values	1.68		3.49**	
Helplessness	*Young*	*Old*	*Young*	*Old*
Mean	13.20	14.75	15.50	19.55
SD	2.59	3.68	2.37	4.36
SED	0.34	0.68	0.28	0.95
t- values	1.50		3.68**	

*p< 0.05; **p< 0.01

One of the fastest growing trends in the world over the past two decades has been increase in the number of women fully employed outside their homes. In the year 2000, women have reached to one - half of the work force and two third of the labor force growth. Two of every three newly created jobs will be filled by women. So, there is a strong need to study women as they have multiple roles to play as wife, mother, housewife and an employee. Being subject to the dual demands at home and work place, they are liable to face a crises in terms of feeling helpless, depressed and in their subjective or perceived well being (for e.g. happiness, morale, life satisfaction etc.).

Moreover, behavior dose not take place in a vacuum, there is always a context. In recent years an ecological approach to human behavior has been urged with increasing frequency and urgency (Barker, 1968, Moss, 1976). Observed patterns of moral behavior in response to physical settings in institutions often persist regardless of the individuals involved. Barker called this phenomenon "behavior - milieu synomorphy"' and Moss (1976) call it "behavior environment congruence". Thus, the ecologist argue that one must study behavior - environment unit rather than just behavior units. Therefore in this context the present research was planned to study life satisfaction and helplessness in working and non- working women of Delhi and Manipur are being hypothesized as two different types of ecology.

On both the dependant measures of life satisfaction and helplessness, differences between women of Delhi and Manipur were not statistically significant. However, life satisfaction could be strongly predicted on the basis of women's employment. The results revealed that working women have more life satisfaction as compared to non-working women, the similar trend was observed in both the states of Delhi and Manipur. However, life satisfaction can be strongly predicted on the basis of women's employment, when separately analyzed. It may be due to the fact

that women (Linda, 1995) have more economic independence and contribute towards family income because of their employment, hence life satisfaction is increased. Various researchers (Liang, 1982 and Myra, 1984) have also reported that life satisfaction is positively and directly influenced by health and financial satisfaction.

On the other hand non-working women feel more helpless as compared to working women, these results are obtained irrespective of the states. Thus, a negative relationship exists between life satisfaction and helplessness of working and non-working women. As regards, with the independent variable of age when young and old women were compared on the measure of life satisfaction, the only significant difference was observed between young and old women of Manipur state i.e., young women reported higher satisfaction in comparison to their counterparts. Virginia and Dianna (1985) explored various factors and their relation to life satisfaction in single, middle-aged professional women. The significance of regrets, internal locus of control and leisure activities to life satisfaction suggests that there are unique factors to be considered in this population that included a balanced life of work and leisure. A perusal of various tables gave a clear-cut picture in regard with the second dependent measure of helplessness. Significant differences between young and old women were found, indicating that older women experienced more helplessness than younger ones. This difference was significantly more evident in working women of Delhi as well as those of Manipur, although the overall impact is much greater in the Manipur sample. Group comparisons between young and old workingwomen did not yield significant results, both for Delhi and Manipur. However, significant differences were obtained for non-working women in both the states.

Thus, it can be concluded from the above results that non-working women experience more helplessness but it is more evident in younger ones as compared to older group. A number

of researchers (Seligman, 1975, Sherman, 1981; Langer, 1983) have emphasized the importance of sense of control for the well being of aged. Locus of control orientation is most widely researched topic in the aging studies. Based on empirical and experimental evidence various models of perceived and actual control (learned helplessness) have been proposed to explain the potential role that various psychological factors associated with reduced control might have in the acceleration of aging process. The elderly are at risk population especially endangered by the commonly accepted view that loss of perceived control or mastery in old age is inevitably accompanied by a corresponding increase of a depressive attitude towards one's own development. Thus, young working women are in a better state of mental health as compared to older as well as non-working ones.

The above results become meaningful in the context of changing scenario of modern society, particularly in India. As India has witnessed profound changes almost in every aspect of social life in the last 50 years. Industrialization and urbanization has changed the attitudes of people towards marriage and social institutions. Economic, social and cultural values are also changing rapidly. As a result, women are not confined in household duty but her role has gone a tremendous change, which has brought psychological well-being and life satisfaction to some; but many still suffering from depression.

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19

Increasing Age, Role Multiplicity and Life Satisfaction Amongst Women

Promila Batra and Arti

Last century has been an era of scientific development, that has led to the development of scientific temper. The scientific temper refers to the spirit of the enquiry, the quest for knowledge, the method of objective verification and capacity to reject what was believed to be true but has been found to be untrue in the light of new scientific discoveries. In this process, one may have been able to get rid of many antiquated customs and obsolete mode of thoughts to which one have been clinging with surprising tenacity. Enhanced status and acceptance of women in India is on positive consequence of such change. One may have been able to overcome many gender stereotypes. The irrational belief in the traditional role of women has now been transformed into a trust and faith in women's potentiality and ability to perform multiple roles.

In India women theoretically enjoy almost the same right as the women in west and the men in this country. But a careful look indicates that this equality does not exist. The rich urban women seem to be at par with their men folk as there are no much restrictions on their movement. They drive cars, go shopping in metropolitan they even go for horse races, stake and lose

money, go for social gathering, dance and drink parties. At the same time, the picture for the middle class and the poor is in striking contrasts. Their subservience to their overloads remains unaffected by the chance around them. They are still the property of their husbands and mere chattels. Even in those segments of society, where the status of women has improved, the working women have to cook food, wash linen, sweep floors, clean utensils, look after and raise children. Many have to even sew clothes for the family and rear cattle along with their job.

A National Committee on Women has been set up to ensure a more effective implementation on the employment. The Equal Remuneration Act is another important step to encourage women to work. Several states have drawn up schemes for the growth of entrepreneurship amongst women and Small Industries Service Institutes have been conducting training programs exclusively for women to encourage self employment. Thus, on one hand women are being encouraged for employment, yet people are not coming out of the traditional role division. An important concern here is, then, to understand the condition and plight of women in the traditional role of men and women, in the traditional division of role of men and women i.e. when the men is not sharing much even when the women in the family is employed.

The multiple roles being played by women have received lot of attention in the past. (Singh and Nath, 1991). No doubt the family responsibility is another major and primary role for the working women, and, she, in the Indian scenario at least can not even think of concentrating only upon her work. Vijayanthimala and Bharti (1997) clearly observed in one of the studies that women perceive their jobs as secondary to the family, This leads them to a failure in achieving a high sense of involvement and self expression inspite of their being loyal and sincere in their work. Infact these and other similar factors lead to a lower level of involvement in their jobs (Singh and Nath, 1991). Not only this the alienation amongst women have been found to be quite

higher than their male counterparts and their non professional counterparts (Pestonjee and Ahmed, 1977; Naik, 1978; Vijayanthimala and Bharti , 1997). Buddhapriya and Khandelwal (1995) noted that many intelligent women act empty-headed in order to fulfill the expectations of their male superior. It can be rightly said that all this leads to the depressing feelings of isolation, powerlessness and normlessness. In other words it can be said that all this will lead to a lowered personal adjustment and satisfaction in life. Life satisfaction or personal adjustment is considered an important variable in younger mature as well as aged people. Several investigators have studied the correlates of life satisfaction. Positive relationships have consistently been obtained between life satisfaction and socio-economic status, perceived adequacy of income and perceived health status (Cutler, 1973; Edwards and Klammack, 1973; Kutner, Fanshel, Togo and Langner, 1956). Then the question is that if the women would perceive satisfaction in life inspite of being multiply burdened.

Growing old is another factor that adds to the levels of stress in life amongst both men and women. The reduced working capacity after 40s makes it difficult to manage the household activities, then what to talk of managing both the household and work role responsibilities. Memory starts declining after attaining the age of forty years (Grady and Craik, 2000). A physical decline is also observed (Yaffe, Barner, Nevitt, Luil and Corinsky, 2001). Mental health has also been shown to decline, although experience has been shown to add to the mental health.

The above discussion seems to indicate that it would be worth exploring the impact of the additional work role and increasing age on the life satisfaction of the women.

It was anticipated that life satisfaction amongst the working women would be lesser than non-working women. Further life satisfaction of the older age women would be more as compared to the younger age women.

METHOD

Sample

A sample of 200 married women was selected from Rohtak district on the basis of availability. Hundred of them belonged to an age range of 25 to 40 years and other 100 belonged to 41 to 60 years. In each age group, 50 women were working and other 50 were non-working.

Tool

Life Satisfaction Scale (Alam and Srivastava, 1971) was used. The scale has 60 items. Every item is to be responded either as 'yes' or 'no'. Test retest reliability of the test is .84 and validity of the scale is .82.

Design

A 2×2 factorial design having 50 subjects in each group was used.

	Age Group	
	25-40 years	*41-60 years*
Working women	n= 50 (G-I)	n= 50 (G-II)
Non-working women	n= 50 (G-III)	n= 50 (G-IV)

Procedure

The life satisfaction scale was administered to the participants and following instructions were given "I am giving you a life satisfaction questionnaire. There are 60 items, each of which has two alternative answers 'yes or no'. There is no time limit but work as quickly as possible". After giving the instructions the questionnaire was given to the subjects. After completion of the questionnaire the scoring was done.

RESULTS AND DISCUSSION

The aim of the study was to compare life satisfaction amongst working and non working women of two different age groups. It was hypothesized that the life satisfaction amongst the working women would be lesser than non working women. Table 1 shows the mean values of the working and non working women in different age groups.

TABLE 1

Showing the mean values on life satisfaction of the working and non working women in two different age groups.

	25-40 Yeras	*41-60 Yeras*
Working women	38.82	40.1
Non-working women	32.6	35.74

Table 1 clearly indicates the mean of the working women is higher than the non working women. For working women the means are 38.82 and 40.1 for age groups 25-40 and 41-60 years respectively. For nonworking women the means are 32.6 and 35.74 for age group 25-40 and 41-60 years respectively. To test the significance of these differences, two way ANOVA was applied. The obtained values of F presented in Table 2.

TABLE 2

Showing the summary of two way ANOVA employed to study life satisfaction amongst women in two different age groups.

Source	**SS**	**df**	**MS**	**F**
A (Age)	244.20	1	244.20	3.46**
B (Working/ Nonworking)	1399.20	1	1399.20	19.85**
AB	43.25	1	43.25	0.61
Within group	13813.5	196	70.48	

**p<.01

Since the obtained value of F for working/nonworking condition is significant, the first hypothesis has not proved. It is interesting to note that inspite of the heavy workload and alienation to the male superiors the life satisfaction was more in working women than non working women.

There are evidences indicating that the life satisfaction is more in working women. Philips and Leslie (1990) in their study showed that satisfaction with living conditions, self rated health and sufficiency of income were powerful predictors of life satisfaction. The working women enjoy higher literacy rates, better health care, greater work participation, consciousness and execution of their rights and self reliance (Pillai, 1995).

The findings are also in congruence with the results of many earlier studies, wherein it was found that personal autonomy of women rises from the control over the family income. Especially that some of the money comes from her own work and thus her status and power within household is increased. (Arber and Ginn, 1993; Chanana, 1996; Cloud, 1994; Kalbagh, 1992; Pillai, 1995). Working women had more power than non-working women with respect of children's affairs, and self decision, decision taking related to household affairs than non working women (Devi and Rayalu, 2003).

Women empowerment rises their status and enables them to have equal rights in the society. Empowerment helps women gain access to many resources in the family as well as in the community to promote their well being, thus raising their self esteem (Blumberg, 1991). The improved financial conditions are also responsible for better and healthier understanding between the wife and the husband, that is more conducive and leads to better marital adjustment (Schoen, Roger and Amato, 2006). Andrade, Postma, Abraham (1999) observed a higher level of 'confidence in coping' amogst Indian working women than Indian non working women.

The second hypothesis was that life satisfaction of the older women would be more than the younger age group. The mean of the younger working women (38.82) is lower as compared to mean of older working women (40.1) indicating higher level of life satisfaction amongst older women. In the nonworking women the mean of the older group is 35.74, that is higher than the younger nonworking women i.e.32.60. This clearly shows that the older women had more life satisfaction than the younger women, whether working or nonworking.

Table 2 indicates that F value for age was found to be significant. The means in Table 1 indicate that the life satisfaction was higher in the elderly group of both working and nonworking women taken up in this study, and a significant F means this difference was significant. Shmotkin, Lomranj, Eyal, Zemach (1999) found that personal socio economic resources effect physical and mental health more strongly in older age than the younger ones.

Thus, the second hypothesis has also proved. These results however, reflect less on multiplicity of role and more on age as the means for older women are higher for both working and nonworking women. Life satisfaction is a positive correlate of maturity that one attains through the experiences with the increasing age. As already discussed in the introduction part the experience and maturity in the life adds to the art of dealing with variety of situations and the skill of problem solving. The age group taken up in this group is such that the mothers feel free from the stress caused by their young children in the older age group. This age is not very old age that may lead to a highly deteriorated physical and mental health status.Philips and Lesile (1990) have shown that the income of the women leads to better health and adjustment resulting in higher satisfaction amongst older women.

Further a Duncan's Range Test (DRT) was employed just to check which one of the four groups was the best on life satisfaction.

TABLE 3

Showing the means of working and nonworking women of different age groups and summary of DRT.

Groups	*Non-working (25-40 Years)*	*Non-working (41-60 Years)*	*Working (25-40 Years)*	*Working (41-60 Years)*
Means	*32.6 (G-III)*	*35.74 (G-IV)*	*38.82 (G-I)*	*40.1 (G-II)*
32.60	0	3.14	6.22*	7.5*
35.74		0	3.08	4.36*
38.82			0	1.28
40.10				0

*p<.05.

It is interesting to note that in spite of the multiplicity of their roles the working women of the relatively older age group exhibited the maximum life satisfaction, Non working younger women had the lowest level of life satisfaction, although the interaction effect between age and working condition was not significant

To conclude, it is interesting to note that multiple roles to be performed by women do burden her, and enhance her level of stress. The discrimination against women, in her work domain has also been evidenced throughout the world (Baker, 2005; Kaminski, 2005; MacRae, 2005). The work role conflict amongst working women is very common (Cinamon and Rich, 2005). Inspite of all this, she is able to successfully come out of this 'Professional Mother's Dilemma' and most of the couples are able to successfully manage the dual challenge of work and family. There are studies indicating that women have successfully come

out of the interrole conflict (Oates, Hall, Elizabeth, and Anderson, 2005; Seller, Thomas, Batts, and Ostman, 2005). Although in order to achieve this the adjustment on the part of men is required (Harris, 2004). Infact, the increasing contribution of the men in family is now being widely recognised (Gordon and Whelan-Berry, 2005; Gupta, 2006; Schoen, Rogers and Amato, 2006). Thus, the slowly increasing contribution of men in family management, the enhanced family income, changed lifestyle due to better financial conditions, an enhanced feeling of the power to take decisions related to her and the family and an enhanced self confidence and self esteem in the working women seems to be responsible for higher level of life satisfaction as compared to non-working women.

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20

Quality of Relationship and Marital Happiness in Working Woman

Sunita Dwivedi and P.C. Mishra

Imaging can improve the quality of relationship in marriage because imaging gives an optimistic outlook. Marriage is the glue that holds the family together and the family is the basic unit of society, indeed of civilization itself.We personally think that there is nothing like quality of relationship and marital happiness in being happy or unhappy rather this is the concept or attitude only. That is to say, the "Image" of marriage that has prevailed in the last two or three decades, especially among young people has an impact on their marital happiness. Having being completely and happily married for a lot of years may look as pretty old fashioned in the view point to some members of young generation. We personally believe in monogamy, fidelity and total commitment to a married partner. The married partner must support his/her counterpart, must practice to create depth in their relationship and must try to keep conflict at its minimum. These three are the basic indicators of the quality of relationship between husband and wife and thus leads to happiness in marriage.

The presence of caring relationship and the experience of support contribute to the quality of relationship in a person's life.

The effect of caring, helping and support on individual's wel! being is marvelous. Supportive, prosocial behavior received from friends, kin, acquaintances, work associates and even strangers have remarkable effects, both directly and indirectly, on our physiology. Social support has been defined in multiple ways. Most early definitions referred to an emotional caring dimension. Moss (1973) defined support as "the subjective feeling of belongingness, of being accepted or being loved, or being needed all for oneself and for what one can do". Cobb (1976) equated the term 'support' with being esteemed and valued, of belonging "to a network of communication and mutual obligation". Thus scholars have come to conceptualize the process of supporting others as an interactional or communicative process occurring between people. Paradoxically, "supportive behavior" can also have negative effect if not well transmitted to the receiver. Otherwise there is a significance of 'support' in everyday comforting. The comfort and emotional support people receive from others helps them to feel better, relieves hurt and stress and improves the quality of any relationship. The provision of emotional support is one of the central functions intimate relationships expect to serve and get. Across the life span, people look to friends and romantic partners as primary providers of emotional support. Out of all relationships, "Marriage" is our most beloved one. Here husband and wife are expected to provide each other with comfort, encouragement, advice, assistance and support of every type. The spouse is frequently the first person from whom support is sought during crises and evidence suggests that support from other source cannot compensate for a lack of intimate or marital support (Brown and Harris, 1978). The process of communication support to one another is very important in marital life. There are many forms of communicating support in marriage. Sympathetic listening, just knowing when to be silent, working together, shared play, a casual affectionate touch, just a glance, shared laughter or a joy of sexual reunion. Whatever

form it takes it is the heartbeat of marriage. When it ceases, the marriage dies (Peale, 1982). Support provides the aid and security during times of stress that leads a person to feel he or she is cared for by others. A growing body of evidence shows that the minor hassles, disappointments and hurts people experience in routine are the major determinants of moods and psychological well being of couples. Not surprisingly, studies (Stone, 1981) find associations between depression or negative mood states and the frequency with which unpleasant events are experienced. Delongis, Coyne, Dakof, Folkman and Lazarus (1982) also showed that the stress resulting from daily upsets may even be a better predictor of physical health that the stress resulting from major life events.

Thus, the ordinary distress and upsets addressed in routine acts of comforting are major determinants of mood and psychological well-being and even physical health in marriage. The emotional support provided through the comforting activates of social network members affords substantial help as people attempt to manage the upsets and stresses associated with every day problems and disappointments. Supportive actives that express concern and solidarity, prompt the articulation of feelings, display sympathy and understanding and provides new information or alternative perspective on a distressful situation significantly contribute to feeling of well being, acceptance and control over events. These feeling in turn, are important predictors of functional modes of coping with stress and several indices of physical and emotional health. The comfort and emotional support people receive from others thus helps them to feel better, relieves tension and stress and improves the quality of life and relationship of couples.

Spousal support is important no doubt, but the process through which partners communicate support to one another is no less important. Two aspects of marital relationships that affect the exchange of help-intended communications are interdependence and assertion of personal control.

According to number of the artists, marital relationships are characterized by on going efforts to strike a balance between interdependence and autonomy (Bochner, 1984). Ideally, couples maintain connectedness and cohesion, but keep clear boundaries between them (Olson, 1981). Efforts to assert and maintain individual control must be balanced against the risk of losing intimacy and closeness. In the context of stressful life events, those in ongoing close relationships must make choices between dependence and independence in how they choose to deal with and the extent to which they involve their partner in their problems. Similarly, partners of persons facing stressful events must be sensitive to issues of dominance and control. Doing too much for their partner may be interpreted as domineering or 'taking over', whereas doing too little may be perceived as lack of concern or interest. Reciprocity in the exchange of assistance is also important as a long period of time is likely to be demoralizing to both providers and recipient (Shumaker and Brownell, 1984).

Thus, both interdependence and maintenance of personal autonomy are important for support in married couples. Husbands/ wives are affected by stressors that impact upon their partner and their partner's success in coping with stress Gottlieb (1985). Schoenbach (1985) collected national sample of 249 employed couples and found that spouse's own education, occupation status and income are the three dimensions for the quality of relationship they share.

Intimate partners are not always successful in their support efforts. It effects their satisfaction level with each other if these unsuccessful attempts are repeated.

Various researches have converged on five major categories of support: information, tangible, emotional, esteem and social network support (Cobb, 1979; Lazarus, 1981). These support types are divided into two broad categories–they are action facilitating support and nurturant support (Cultrona, 1990). Action facilitating

support is intended to assist the stressed individual to solve or eliminate the problem that is causing his or her distress. Informational and tangible support comes under it, while nurturant support encompasses efforts to comfort or console, without direct efforts to solve the problem causing the stress. Emotional support and network support fall into this category. Esteem support may serve either an action facilitating or nurturant support function Esteem support refers to expression of regard for one's skills and abilities. Reassuring a person of his or her intrinsic worth may lessen the intensity of negative emotions engendered by stressful events especially those involving failure or blame. Evidence shows that husbands and wives both welcomed emotional support, regardless of the type of stress they are facing.

Demand of support is required more by the dual earner couple and support process arises between married couple on those occasions when one of the partners experiences conflict between the demands of work and the demands of family life. When a woman starts here journey to the work place, she, directly or indirectly indulge into stressful situations. Here she needs maximum support from her intimate partner—the husband. If she gets it, the level of conflict and stress decreases and depth between the couple tends to increase that in turn effects the quality of their relationship. Episodes of conflict between the demands of work and family frequently occur and therefore present multiple occasions for the mobilization of the spouse's support. The physical labour and emotional drain entailed in simultaneously working inside and outside the home make the expression or absence of spousal support highly consequential for both the women's well being and for the state of the relationship between husband and wife. Particularly when both spouses are employed, there are many complex influences on the division of labour in the home and on the ways work and family demands are played out. So the role of spousal support is always welcomed. Barnett and Rosalind (1999) tried to find out the relationship between

household work and psychological distress in dual career couples. They found that hours spent in house hold work would be related to psychological distress in dual career couples that effect their marital happiness and quality of relationship.

Micheline *et al.* (1997) also studied the relationship between marital satisfaction and household labor of dual career couples. They found that for working couple division of household talk, participation in childcare, degree of responsibility and perception of equity effects that level of their marital happiness. But one thing is very important here. Support that was provided spontaneously enhanced its rating while having to ask for support diminished its value. Support that is spontaneously tendered is more desirable and acceptable than support that must be solicited because it signals sensitivity to the recipient's need (Eckenrode and Wethington 1990). It confirms that the husband is attending to the relationship and living up to these responsibilities to share his partner's tasks as well as her emotional life. Conversely, support that must be solicited reflects less relationship and greater emotional detachment. Asking for support is seen as problematic because of its costs to the solicitor's self esteem (Eckenrode and Wethington, 1990). It can arouse feelings of embarrassment, vulnerability, dependence on others and indebtedness and it requires an admission of one's own incompetence. In a happy union, a reliable husband does not add to problems once resolution is achieved. Similarly, a husband who is willing to negotiate and is flexible also facilitates resolution. On the other hand, a husband who is inconsistent lacks understanding, or shirks his responsibility aggravates his wife's problems and therefore is viewed more negatively. Wives who do not have to ask for help are more likely to conclude that their husbands are closely attend to and recognize the legitimacy of their needs, and that the provision of emotional and practical support can be taken for granted in the relationship. In contrast, wives who have to request help may have to acknowledge to themselves that their husbands are either

oblivious to their needs, fail to see their needs as legitimate or loathe to share their talks. Any of these admissions implies deficiencies in intimacy and mutual responsiveness of the relationship. The personal qualities and attitudes that the husbands bring to their interaction with their wives, and the ways they furnish support also convey the information about the quality of relationship they share. A spouse who is understanding reliable and flexible conveys that he is committed to meeting his partner's needs, and thereby contributes to the durability of the relationship. Yogev and Brett of Northwestern University (1985) found that spouses who are not satisfied with the distribution of family work also are not satisfied with the marriage. This is the most critical issue with dual career couples. Sears and Heather (1992) reported that when a woman is also going outside to work, she needed support in household work, otherwise she suffers from work overload and it would be indirectly associated with husband's as well as wive's marital adjustment.

In the forgoing pages the conceptual frame work alongwith the historical background of each variable has been presented. In the next pages a brief statement of the problem alongwith methodological considerations will be presented.

Just like support, depth in intimate relationship (marriage) and minimum amount of conflict is an intoxicating fragrance of marriage. When the emotional support is there between the couple, depth and understanding in their relationship also increases. Conflicts in any relationship, can be taken as interruption, disagreements, tension, defensive versus supportive communication, anxiety tension and emotions, antagonism, negative interpersonal expressiveness and contradictions between verbal and nonverbal messages. Interpersonal conflict occurs at several levels of experience. Cohn (1990) proposed that conflict occurs at three levels - "specific disagreement" (e.g. argument over a particular issue) "problem solving discussion" (e.g. bargaining), and "unhappy/distress relationships" (e.g. patterns

of interaction that indicate distressed couples). Conflict at one level does not necessitate conflict at another level but conflict at one level may become manifest at another level. For example, relational level problems may or may not emerge as disagreements about particular behaviors and issues. Conflict researchers have also emphasized how adults make sense of conflict. Two general theories representing this class are social exchange and attribution. In social exchange terminology, conflict occurs because in close relationships, interdependent parties share outcomes and depend on each other's action to achieve valued resources. People have conflict regarding their "mutual fate control" and "mutual behavioral control". In other words people may disagree about the outcomes they receive due to the exchange of resources as well as difficulties in the coordination of their activities (Braker and Kelly, 1979). Lack of conflict occurs in relationships that are both rewarding and equitable and conflict occurs most frequently in relationships lacking in personal rewards or in those characterized by inequity. In either case, the individual attempts to arrive at a profitable and fair reward system and if attempts to do so fail, then they may "Leave the field" (Adams, 1965)

Attribution theory focuses on attributions or explanations that spouses make for marital events. The literature reveals that dissatisfied people are more likely to attribute the causes of marital problems. Dissatisfied couples generalize the causes of particular problems. To the dissatisfied wife, the reason her husband does not show affection derives from his selfishness, which also indicates the global inferences of why he dos not perform his share of household duties, why he avoids communication and why he neglects the children (Bradbury and Fincham, 1990)

Interactional researches focused on conflict by analyzing observed behavioral sequences, comparing satisfied/adjusted couples to dissatisfied/maladjusted couples. These theories operate from the premise that the couple systems are defined by micro-level interaction behavior, typically witnessed in particular

sequences. The issue then, is to identify sequences that correspond to relational well-being. Clearly speaking, exceeding amount of conflict really harm marital relationship and hampers the marital happiness ; it also effects the quality of relationship between the couples.

Happiness in marriage is a result of spousal support, depth in their relationship and the amount of conflict they carry. Marriage is a compact relationship sealed with love that cannot be broken. It is a promise between two consenting adults to join their lives and stick together through thick and thin good times and bad, until life comes to an end. This is the Indian concept of marriage and when we think of marriage in Indian context, there is nothing like marital happiness or unhappiness. The couple must create the happiness in marriage. They should start their life with this thought only. But unfortunately during the last few decades, the word "Marriage" has been influenced by the American concept of marriage. But the very fact is that to be happy in marriage one needs mature love and not the romantic love only. Because mature love has a spiritual dimension that alters a person profoundly and changes him or her from a self-oriented person to an other oriented person. In matured marital love, the beloved's welfare and happiness becomes more important than your own. We think that real love is the accurate estimate and supply of another's needs. Love is what comes from living through difficulties together. These concepts are a long way from the romantic, sex-saturated depiction of love that is so prevalent is western society. We think marital happiness derived out of quality of their relationship has nothing to do with working or no working set of woman, because Love, in marriage is an attitude. No matter whether the woman is working or non working, how long the couple is married or how different they are; they can keep the flame burning by providing support to each other. If a husband and wife are separated due to working hours during most of the day, as many working couples are, it is wise to set aside a specific time, perhaps early in the

morning, perhaps before going to bed, to talk about plans and problems, grievances or misunderstandings, all or any aspect of living together. That way difficulties can be dealt with while they are still molehills and not mountains. Once the habit of sharing things verbally is established, the marital happiness becomes much more resistant to the stress and strains and conflicts that surround it. The truth is, marriage is a contract that needs to be renegotiated constantly, with compromises and concessions and common sense. There are many forms of support and communication to make your wife glow—sometimes sympathetic listening is the best form sometimes just knowing when to be silent. Sometimes it is working together sometimes it is shared play. Sometimes it is a causal and affectionate touch, sometimes just a glance, sometimes shared laughter, sometimes the joy of sexual reunion. Whatever form it takes, it is the *heart beat of marital happiness*, when it ceases, the marriage dies.

Peale (1982), an inspirational writer and protestant minister quoted a case in his book, which I like to refer here: A young husband stationed in England fell in love with an American Red Cross Girl. When the war ended the soldier come back and asked his wife to give him divorce. But the wife had had a quaker upbringing , which meant that she had a quiet inner strength. She did not panic, did not fly into a jealous rage. She told her husband and that she knew him better than he knew himself. He was, she said, basically a good father and a good husband that side of him would reassert itself some day. She would wait simply till that day but she would not give a divorce. She said that our marriage is going through a difficult phase, but sooner or later it would come out to the other side, stronger than before. She said that she strongly believe that they would be in love again.

That husband departed for war again. He told the Red Cross Girl about the stubborn attitude of his wife. So they waited and waited and waited for the attitude of the stubborn wife to change. Finally, after sometime, the glamour was gone from their situation.

The Red Cross Girl wanted the husband as her own and not a man anchored to another woman. She left the man. By the time the war was over and the man gave a second thought to himself. He realised the deep emotional ties with the children and wife. He was impressed that his wife was really a great woman. Finally, sheepishly, he come back home and his wife welcomed him quietly. She was not surprised. It was all working out just the way she had imaged it. There were no recriminations. She took him back and that marriage went forward successfully, *saved by emotional balance and good sense of a real woman* who imaged her way through an ugly situation and came out triumphantly on the other side. *This is the power of a woman who can improve the quality of relationship and create marital happiness.*

According to Burr (1967) "marital happiness" can be attained through some type of some "marital goal". Bernard (1972) said that "satisfaction" is another underlying factor of marital happiness. According to him, "Satisfaction" refers to the degree to which the desires of the individual are fulfilled. This factor of "Satisfaction" says Bernard, may be "within the marriage situation as a whole" or " as satisfaction with sex or companionship."

Keeping all this beauty of marriage in mind we tried to find the relationship between quality of relationship (support depth and conflict) and marital happiness in working woman and to find out the relative contribution of quality of relationship (Support, conflict, depth) for marital happiness of working woman.

For this purpose, the following hypotheses were formulated—

1. There will be positive relationship between support (QR) and marital happiness in working woman.
2. There will be negative relationship between conflict (QR) and marital happiness in working woman.
3. There will be positive relationship between depth (QR) and marital happiness in working woman.
4. Quality of relationship [support, conflict and depth] will significantly predict the marital happiness of working woman.

METHOD

Sample

The study was conducted on 125 working wives. The age of the respondents ranged between 35 to 45 years with average age of 40 years. Their monthly income ranged between 10000/- to 15000/-. Most of the wives were graduate or post-graduate working as lecturers or bank officers. The working experience of the couple ranged between 10 to 20 years. All the 125 working wives were well placed working women, and well versed in English and Hindi language both. Years of marriage was 7 plus.

Tools

The following psychometric devices were utilized in the present investigation.

Marital Happiness Scale–MHS, developed by Mishra (1991) was used to assess the level of marital happiness among couples. The scale consists of 35 statements with five alternative responses namely—strongly agree, agree, uncertain, disagree and strongly disagree. This scale measures marital happiness from the five dimensions namely interpersonal attraction, personal adjustment, mutual participation, mutual liking and marital satisfaction.

The internal consistency of the scale determined by odd-even method was found to be 857. content validity of the items was determined by judges rating for the suitability of items was determined by total correlation between each items and total scores of the scale.

Quality of Relationship Inventory–QRI was developed by Pierce *et al.* (1991). The current version of QRI Includes 25 items that assess the amount of support, conflict and depth. in a broad range of close relationship. The QRI items are rated on a 4 point scale, ranging from 1 = not at all, to 4 = very much.

Accumulating evidence suggests that the QRI is a reliable, valid measure of these three aspects of close relationships (support, conflict and depth). QRI scale also has high test - retest reliability with correlations between scores on each scale across the 4 months period ranging from .66 to .82 with an average correlation of .75. Infact, these test retest correlations are close to the internal consistency estimates, indicating that nearly all of reliable variance in the QRI scores are attributable to a stable conception of the relationship.

Design

The present study was correlational in nature.

The present study primarily focusing on the following psychological variables;

1. Marital happiness (MH) and
2. Quality of relationship (QR).

Procedure

Prior to administration of the test, respondents were told about the utility of the study. They were asked to fill the questionnaires by themselves according to the instructions written on both of the questionnaires. Respondents were requested not to leave any item unanswered. They were assured that their answers would be kept confidential. Scoring for both the questionnaires had been down accordingly as instructed in their manuals.

RESULTS AND DISCUSSION

Coefficient of correlations were computed for the relationship between Quality of relationship (support, conflict and depth) and marital happiness. Stepwise multiple regression analysis was computed to find out the relative contribution of quality of relationship [support, conflict and depth] for marital happiness in working woman.

TABLE-1

Intercorrelation matrix for quality of relationship and marital happiness in working women (wives)

QR	*YMH*
X1 Support	0.37*
X2 Conflict	-0.33*
X3 Depth	0.19**

* Significant at .01 Level; ** Significant at 0.5 Level.

'Woman is also a human being', this thought gave blow to feminism. Specially, when we are talking in reference to working woman/wife. She works in shifts—home and working place. She works continuous, daily and life long. Really, she is more capable than a man. Above all, while working in shifts, she carries the baby for nine months, one or twice even then she hardly gets irritated and fulfills her responsibilities. Gradually, she becomes tired–physically, mentally and emotionally because in traditional system of Indian married family—there is still less sensitivity than required for her. To improve the life quality of working woman (who is wife also), support is a considerably important factor for the woman to feel happiness in marriage. The basis of satisfaction in a marital relationship is very different from those in friendship or dating relationship. When house-hold affair and child care enter into married life of a working woman, lots of support is needed and required from the partner to be maritally happy. In marital relationship emotional responsiveness and support is more important than in short term relationships. For working wives, marital satisfaction was correlated with their perception of spouse sharing by work (support). Wife needs support in number of areas including relationship with in-laws, dealing problems with children, daily routine etc. If wife is working, she should get rid of some home duties, if possible. The nature of support can be this way also - the husband should be

less demanding, can offer the help in some areas of house hold duties, can support his wife emotionally etc. Men and women are generally unaware that they have different emotional needs. As a result they do not know how to support each other. Husbands typically give what men want, while wife give that women want. Each mistakes in assuming that the other has the same need and desire. As a result both of them remain dissatisfied and resentful. So support should be on the basis of what the other person standing in front of you requires. Women primarily need caring, understanding, respect, devotion, validation and reassurance while men need depth, acceptance, appreciation, admiration, approval and encouragement. Thus the first hypotheses is confirmed which shows that support (X_1) is significantly and positively correlated with (MH) the marital happiness in working women (Table 1).

(X_2) conflict, the area of QR, was fount to be negatively correlated with (MH) the marital happiness in working women/ wives (Table 1) For a couple, conflict is kept to be minimum. All human relationships involve some conflict. Acceptance of the inevitability of conflict is an essential step towards dealing with it effectively. The popular ideology of romantic love does not lead to such demand, rather the husband and wife need to express themselves and discuss over the issue to deal with conflict. Openness is necessary within relationship. One may call it transparency of relationship for Avoidance of discussion tears apart the marital relationship for topic after topic becomes taboo. The couple becomes less and less close and less and less unable to understand each other. So to continue the marital happiness and make the working wife satisfied, discussions and communication should not be avoided to resolve conflict. Thus the second hypothesis is also confirmed.

(X_3) Depth was found to have a positive and significant relationship with (Y) the marital happiness in working woman/ wives (Table 1). It implies that if the depth of relationship of

working wife with her husband will increase the level of marital happiness will also increase in their relationship. Thus the third hypothesis is also confirmed.

TABLE-2

Summary of stepwise MRA (Multiple Regression Analysis) prediction of marital happiness working wives (N=125)

Predictor Variable	*R*	*F-Ratio*	*P*
X_1 Support (QR)	0.375	20.111	.01
X_2 Conflict	0.476	17.829	.01

Multiple Regression Analysis shows that out of all variables support (X_1) and conflict (X_2) is the most significant predictor for marital happiness in working women/wives (Table 2). These two factors (X_1 and X_2) have significant F-values which are significant al. 01 level. Thus these variables predict the happiness of working wives in their marriage. Thus, the fourth hypothesis is partially confirmed.

The result of the present study can be a beautiful suggestion for the husbands whose wives are working. When wife steps out for job/career, number of problems arises - that is obvious. But together they can solve it, together they can remove it, together they can bless each other. Since women is a more sentimental individual so her dealing is more important. She needs understanding and support from her spouse. Here the duty of the husband is a step ahead. He must understand the fact that man and woman are different in nature. They have different needs too. As the results show, a wife needs every kind of support to be happy, then only will she be in less tension and conflict. When the conflict will be less, happiness in their relationship will be more. This is essential also because happiness/unhappiness marital relationship directly effects the growth and behavioural pattern of the children also. To make their future best, couple must secure their present by not getting it much conflict and supporting each other at maximum.

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21

Depression and Marital Adjustment Among Working and Non-working Women

Veena Katyal and S.K. Srivastava

In the present situation of India, a single income is no longer sufficient to run the family. Wives wages have become essential. In this newly acquired roles, the working women face challenges differing from those of housewives, because in most cases the working women's multiple role involvement disturbs other expectations and their great range of demands. However, under inherited gender norms married working women find themselves torn and tired, and suffer from guilt when working outside, that they may be neglecting their home. There is no doubt that wives often enter work, marriage with fixed role expectations of themselves and others, but later fail to fulfill those expectations. This brings about a conflict between what they expect and experience. Previous findings also suggests that role overload can result in depression and conflict among spouses. This can happen when one is either required to play two roles at the same time, or to play different roles successively in relation to the same person. Women who assume home roles and non home roles frequently experience conflict between completing role

demands. (Begum and Tasneem,1984).The attitudes of working women are likely to greatly influenced by the addition of the work role to their roles of wife and employee. Acceptance of goals of marriage and work simultaneously may mean conflict for many and inevitably presents difficulties. The problem is likely to become more acute and accentuated because fulfillment of the two goals require qualities of different types. The attainment of goal of marriage requires "Self-negation" and cooperation while to be successful in the other pursuit requires "self- enhancement" and competition.

When the married working women considered balancing of outside job and home life difficult, she uses to suffers from both the depression as well as marital adjustment problems. The problem of depression in women, particularly, among housewives, is an important aspect of the process of social changes in India. Traditionally, Indian women worked within the framework of family system. Also, the working women, when does not impose her duties on her husband and other members. She is perceived as kind, positive, and non-assertive. But if she doesn't do this, she suffers from the problems related to her marital adjustment as well as depression.

Depression is a word with many meanings. The feeling of sadness, every one have experienced from time to time is what people mean when they use the word. The word depression is also used as a label for a collection of symptoms such as sadness, irritability, and changes in sleep, appetite and weight. Depression is a word used by mental health professionals to refer to an illness or group of illnesses called mood disorders. Hippocrates the Physician of Greece's Golden Age, believed that many physical and emotional problems were related to imbalances in the body's humor's or liquids. Depression, according to him, derived from an excess of black bile, a fluid involved in the digestive processes.

Depression is also termed as *Melancholia,* 'melan' means black and 'cholia' means bile.

Some years ago it was considered that only the women are the victims of the depression. Though, it is correct to some aspects; as women are much emotional and sensitive in nature rather than man and become tensed due to even a minor problem. There is a difference in the structure of brain. This difference makes women more emotional and sensitive than man. Adjustment may be defined, as the continuous interaction with one self, with other people and with the world. These three factors are constantly acting upon and influencing, and the relationship is reciprocal for one is constantly acting upon them as so well. One self that is the sum total of what one is his body, behavior, thoughts and feelings - is something that one is dealing with in every split second of the present. Landis (1954), in his study of Marital adjustment has used the term adjustment, "to refer to the state of accommodation which is achieved in different areas where conflict may exist in marriage."

When people marry, they enter in to a new relationship, yet they bring to it the same behavior patterns, needs, and attitudes that characterized their former relationships. In married life, it is both the interpersonal and intrapersonal interaction that are liable to affect marital adjustment. The marriage partners and other member if the family might have to establish harmonious relationships amongst themselves as well as individually with themselves in order to achieve marital adjustment.

Since in a traditional period both perception and interaction became rather blurred, one is apt to know more about what one is entitled to expect from one and this imbalance of rights and obligations may create friction in inter-personal relationships more so in marital relationships. Thus, the ambiguity and uncertainity of roles of the spouses in this newly emerging, "working wife

families" together with the complexities of modern life and exaggerated emphasis on individuality and individual gratification, make it more difficult for both husband and wife to adjust to their marital obligations. It is on account of all this that the problem of adjustment in marriage has acquired greater importance today.

Since ever so much is expected and demanded out of marriage, the disappointment, on its falling short of that, may cause greater depression and makes for a deeper basis for friction. This may be one of the circumstances loading to the emergence of the problem of adjustment in marriage. Depression and Marital adjustment also arise in the situation where husband's and wife's role and status concepts are, not equally modern or equally "traditional". On other hand, accordant attitudes of spouses towards each other's demands and expectations pertaining to their status facilitate marital harmony. Now that the educated women have come out of the domestic world, problem of Depression and Marital adjustment has come to light in urban areas and those are the problems which are being dealt in the present study.

Aims and Objectives

The present study is an attempt to test the following hypothesis:

1. There would be significant difference between the working and non-working women on level of depression.
2. There would be significant difference between the working and non-working women in terms of marital adjustment.
3. There would be significant relationship between depression and marital adjustment of working women.
4. There would be significant relationship between depression and marital adjustment of non-working women.

METHOD

Sample

The total sample for this study constitutes 300 married women, i.e. 150 working and 150 non-working women. The sample was selected from Moradabad district with the help of quota technique. The criteria of inclusion of women included:

(*a*) age range from 35 to 50 years.

(*b*) equal socio economic status.

(*c*) working women belong to same profession.

The questionnaires were administered to the respondents by the researchers. They were assured of the complete confidentiality of their responses and the importance of accurate responses was emphasized.

Tools

To accomplish the aims of study, following tests were used:

Depression Scale: The scale developed by Karim and Tiwari(1986) was used for the assessment of the level of depression. The scale measures the following dimensions/aspects of depression: Apathy, Sleep disturbance, Pessimism, Fatigability, Irritability, Social withdrawal and Self centredness, Dejected or Sadness, Self-dislike, Self-acquisition, Self-harm, Somatic reoccupation, Indecisiveness. The scale comprised of 96 items relating to twelve aspects and each item has to be rated on five point scale. maximum scores show high level of depression. The reliability of the scale was found to be 0.89.

Marital Adjustment Inventory: Inventory developed by Misra and Srivastava (1997) was employed in the assessment of marital adjustment. This inventory comprised 55 items and each item has five alternatives. The inventory covers the following dimensions of marital life: Feelings for spouse, Harmonious relations,

Communication, Mutual understanding, Sexual relations, Others factors related to the marital life. Maximum scores indicate better marital adjustment. The index of split-half reliability was found 0.76 for the inventory as a whole.

Procedure

The questionnaire was distributed individually to all the subjects/women. It was made clear to the respondents that the questionnaire was to be filled out anonymously and their responses would be kept confidential. Respondents were requested to fill up the questionnaire according to the instructions written on it... completed questionnaire forms were collected from each respondent. The obtained data were analyzed as per objectives of the present study.

RESULTS AND DISCUSSION

The main aim of the present study was to investigate the significance difference between working and non-working women in terms of Depression and Marital Adjustment.

Present scenario (Tabe-1) reveals that there are significant differences between working and non-working women regarding aspects of depression- apathy, pessimism, fatigability, irritability, self-centered, self-dislike, self-acquisition, self-reoccupation, indecisiveness. They do not show however, differences in aspects - sleep disturbances, sadness or dejection and showed no response on self-harm. It means life style had a significant effect on depression. Therefore, hypothesis no.1 "There would be significant differences between the working and non-working women in terms of Depression" has been found to be statistically significant. Hall (1988), Khanna (1992), studied that depression was significantly positively related to positive life changes in working samples and negative in non-working subjects. Asuncion, Acevado, Lopez (1993) also concluded that employed mothers reported better mental health adjustment than their unemployed counters parts.

TABLE-1

Comparison Between Working And Non-Working Women regarding aspects of Depression.

Aspects/Dimensions of Depression	*Working women* (150)		*Non-Working* women (150)		*t-value* with significant levels.
	MEAN	S. D.	MEAN	S.D.	
APATHY	3.84	1.76	4.67	2.24	3.07**
SLEEP DISTURBACES	5.85	2.46	5.27	2.15	1.93 N.S
PESSIMISM	4.36	2.14	6.24	2.96	5.53**
FATIGABILITY	5.48	2.16	4.86	2.23	2.14*
IRRITABILITY	5.34	1.72	5.87	1.98	2.21*
SELF CENTERED	6.86	2.74	5.72	2.43	3.35**
SADNESS	3.45	1.44	3.82	1.76	1.75 N.S.
SELF-DISLIKE	4.27	1.74	5.18	1.56	4.14**
SELF-ACQUISITION	4.24	1.65	4.83	1.78	2.68**
SELF-REOCCUPATION	3.28	1.58	4.71	1.72	6.50**
INDECISIVENESS	4.82	2.36	5.75	2.68	2.81**

* $p<0.05$; ** $p<0.01$; N.S. (Non-significant).

TABLE 2

Comparison Between Working Women And Non-Working Women in Terms of Marital Adjustment.

Groups	*N*	*Marital Adjustment Scores*		*t-value*
		Mean	*S.D.*	
Working women	150	210.55	47.77	10.4**
Non-working women	150	160.45	34.07	

** $p<0.01$.

From results given in the table-2, it is apparent that the difference between marital adjustment scores of two groups of women is statistically significant beyond changed expectations(t = 10.4). Thus, the hypothesis that "The working and non-working women would differ significantly on marital adjustment level", is

confirmed. Working group of women maintains more marital adjustment. Working women had better understanding, more satisfaction and fulfillment of expectations. Whereas, the non-working women perceive little personal responsibilities for marital outcomes, as most of the times, they are busy in their household activities, as looking after in- laws, being a begetter of children, preparing meals and so on. That's why she is unable to take out a time for her personal \ marital life. In such condition the marital satisfaction suffers. As well, working women is enabled better to understand the man and his problems. Rossi (1964), Nathawat and Mathur (1993) findings also indicates better marital adjustment in the case of Ss working outside the home as compared to housewives. They scored high on general health, life satisfaction and self-esteem measures and lower scores on hopelessness, anxiety and security.

TABLE 3

Showing the Relationship Between Depression and Marital Adjustment of Working Women by applying chi-square (χ^2).

Degree of Marital Adjustment	*Levels of Depression*			*Total*
	High	*Average*	*low*	
Better	17	15	28	60
Average	13	16	27	56
Poor	06	17	11	34
Total	36	48	66	150

$\chi^2 = 25.36$; $p<0.05$.

On the basis of the table-3, our third hypothesis, that "There would be significant relationship between depression and marital adjustment of working women" is found to be significant. Table-3 reveals that the chi-square value obtained is 25.36, which is found to be significant at 0.05 level of significance. A working women has to perform two roles. Firstly, a mother and a wife and

secondly, of an employee. Both the roles demand on her time and energy. Some of the working women experiences depression, balancing outside job and home life difficult. And thus bring multiple tensions to their marital relationship. On the other hand, if the marital harmony of the spouses is disturbed then, it may lead to higher rates of depression including stress, anxiety and so on. So, there is a significant relationship between depression and marital adjustment of working women.

TABLE 4

Showing the Relationship Between Depression and Marital Adjustment of Working Women by using chi-square (χ^2).

Degree of Marital Adjustment	*Levels of Depression*			*Total*
	High	*Average*	*low*	
Better	27	17	14	58
Average	25	12	14	51
Poor	13	15	13	41
Total	65	44	41	150

$\chi^2 = 19.1$; $p<0.05$.

Fourth hypothesis was that "there would be significant relationship between depression and marital adjustment of non-working women". Table 4 reveals that the chi-square value is 19.1 which is significant at 0.05 level of confidence. It reveals that there is a close relationship between depression and marital adjustment among non-working women. So, hypothesis is found to be significant. Generally, depression is related to negative life changes in non-working women. Greater household management is significantly associated with higher depression, and effects marital harmony. Some women are pessimistic in nature. They find themselves unable to take decisions by their own. They are totally dependent on their husbands. This makes them prone to maladjustment in married life and as a result, they become depressed even in a ordinary situation.

CONCLUSION

The findings of the present study reveals that working and non-working women show significant differences in terms of depression. Significant differences have been found between them on aspects—apathy, pessimism, fatigability, irritability, self-centered, self-dislike, self-acquisition, self- reoccupation, indecisiveness. However, non-significant differences were found on aspects—sleep disturbance, sadness, and showed no response to self-harm. Hence, depression was found to be high among non-working women. Significant differences were found among working and non-working women in terms of marital adjustment. Working women tends to show better marital adjustment as compared to non-working women. Significant relationship between depression and marital adjustment was found to be higher in working women as compared to non-working women.

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working women. Significant differences were found among working and non-working women in terms of marital adjustment. Working women tended to show better marital adjustment as compared to non-working women. Significant relationships between depression and marital adjustment was found to be higher in working women as compared to non-working women.

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SECTION V

SOCIO-POLITICAL BEHAVIOUR

22

Women in Decision Making: A Review

Sarika Choudhary

Empowerment can imply different things to different people and in different context, but in its widest sense, the term signifies the right to choose. One can not be called empowered until and unless one has the right to choose or decide. This applies equally to woman empowerment. Women to be truly empowered must play an active role in decision making at all levels. Today, it is widely accepted that, "women need to be where economic decision making and financial allocations take place. For too long women have been takers and not makers of economic policies and national policies. The challenge is to change this" (Aggarwal, 1995).

Women constitute half of the world's population, perform nearly two third of its work hours, receive one tenth of the world's income and own less than 1/100th of world's property thus reflecting the need to empower the women. The sooner we realize that it is a reality and not a myth, the faster the society will develop. To enable women to fight against all the hurdles they face, it is necessary to empower them by ensuring their participation in decision making bodies at all levels. Decision making by women is important because of the following reasons: Firstly, it is the question of *human rights*. Women constitute half of the world population, so it is their right to have equality of

opportunity and treatment in employment. Secondly, it is a matter of *social justice.* There can be no real power in a democratic world without equal participation of women and men in all spheres of life and at different levels of decision making. Thirdly, the goal of development can't be attained without women's full participation not only in the development process, but also in shaping its objectives, goals and targets. Women's participation is changing the world in which we live bringing in new priorities and perspectives to the political process and the organization of the society.

Decision making by women is important not in only in the political sphere, but in social and economic life also. Gandhiji writes, "Man and woman are one, their problems must be one in essence. The soul in both is the same. Each is a complement of the other. Thus, one can't live without the other's active help." In this context, Ireland's former president Mary Robinson, now united nations high commissioner for human rights puts things somewhat differently. In his views women's will power and capacity of doing work is more than men and the work they do, is full of confidence. According to Mary Robinson, "I do feel that women tend on the whole to draw more from their experience and want to play role in a power structure to influence change…it's part of a whole different reference point. Women in most contexts are coming from a kind of minority, if not marginalized, positions into one where they are trying to move nearer to the centre and that brings with it all the empathy, the listening and sense of questioning" (Faming, 1995).

Many studies have found that women are more efficient managers as they have more potential and power to maintain the balance between dual role i.e. at home and at offices etc. also. In this context, renowned psychologist Jean Piaget (1965) observe that, "Girls showed a greater tendency than boys to make exceptions to rules and were better able to adopt to innovation."

Thus, it is now recognized that women are harbingers of human culture and active partners in economic development. Though the issues related to women equality and decision making have been a matter of interest for sociologists, economists and psychologists since long but we find that various in depth studies in this regard have been carried out by social scientists all over the world since 1950's. That is why we have chosen the period of 1950 to 2001 for a brief reviewal of the available literature. The analysis has been divided into two parts: (*a*) Studies at International Level. (*b*) Studies at National Level.

STUDIES AT INTERNATIONAL LEVEL

Honey, Britton and Hotchkiss (1959) studied decision-making pattern in the use of family financial resources in rural Pennsylvania (U.S.A.). The study observed that joint decisions were taken more often regarding the purchase of home furnishing and equipment (73 percent). Other commodity purchase frequently planned together by husband and wife was the family car (53 percent). Two-thirds or more males belonging to farming community decided by themselves about purchasing the livestock, farm equipment, seed, fertilizer, care and farm implement repairs etc.

Abell (1961) analysed decision-making pattern on the farms in Ontario state (Canada). It was observed that in 17 per cent cases, members other than husband and wife had a say in decision-making process pertaining to farm plans and purchase of machinery and equipment.

Carven (1963) has indicated that home decisions are likely to be made jointly at all economic levels rather than farm decisions. Farm families of low and medium income are more likely to make decisions jointly compared to the families of high income and those who live on highly specialized farms.

Wilkening and Bhardwaj (1966) analysed the aspirations, work role and decision-making patterns of husbands and wives in Wisconsin (U.S.A.). It was observed that husbands tend to dominate in farm decisions like how much fertilizer to buy, whether to try out a new crop variety or not, specific make of machinery to purchase and when to sell livestock, etc. The major decisions pertaining to buying or renting land, borrowing money for the farm and buying farm equipments tended to be made jointly by the husband and the wife.

Weller (1968) has observed in his study of Puerto Rican couples that while the knowledge of contraception was not related to the type of family decision making, its effective use was the greatest among the couples with less dominant husbands.

Davis (1970) has made a study related to decisions regarding purchase of consumer durables in four suburbs of Chicago in 1969. He observes that male members had definite stronger say in automobile purchase whereas the female members showed a relatively stronger influence in the purchase of consumer durables. Comparatively, men exert higher influence in allocation decisions in case of both products while women show a comparatively higher influence in selection decisions.

Salaff (1973) conducted a study on Chinese families and concluded that in China major decisions were taken by head of the family as in traditional society, but the wife indirectly manages the family income. It means that financial management is handled by women in the family which implies that she has some allocative flexibility.

Lebra (1976) conducted a study in modern Japan and reported that usually urban women handle the whole income. 97 percent of women in urban housing developments, as against 66 percent of rural housewives receive their husbands pay cheques and gave them monthly allowance. Husbands were not even aware about

the family savings. Thus, this study indicates that respondents had highly significant role in family's income spending.

Vagel (1978) also found that women of Japan received their husband's pay from him, paid all bills, brought food and made most of the decisions on major expenditures, with some mutual consultation. She gave her husband a spending allowance and took care of savings, investments, banking and budgeting herself.

Sajogyo (1980) has indicated that in Indonesia decisions are usually shared, with men intervening in domestic matters and women in agricultural and economic fields. Decisions on purchase of land, moving to a new house, education of children and their marriages are discussed together though the husband's decision is final.

Spencer (1981) in a case study of the role of women in Sierra Leone found that women play a minor role in agriculture related decisions while they are found to be playing an important role in household decision making as well as in decisions relating to the borrowing of money. It has been discovered that women share equally the proceeds of sales of the cash crops as well as in the profits derived from retail trade.

Robert (1982) reported that Italians are more liberal than Germans in leaving free their wives in assigning traditional duties. However, for Germans sharing of decision making was 80 percent in all areas while it was only 60 percent for Italians.

Zelizer (1989) contrasts the working women with those belonging to the middle class who do not work to earn. In working class, women hand out allowances instead of receiving them as in middle class. Their managerial power is greater than that of their middle class counterparts although their discretionary power may not differ significantly. It is added further that the dimensions of monetary power within the family regarding consumption, savings, investment or managing the households have very special meanings that are culturally or socially determined.

Janzen (1994) studied the various roles played by women in rural southeastern Botswana and the accompanied level of decision making. For discussion of life cycle stages in the households three age brackets were taken: (1) 23-44 yrs.; (2) 45-59 yrs. And (3) 60 yrs. and older. This thesis examines who makes the decision regarding children's attendance at school, clearing and ploughing land, animal husbandry and migrant remittances. The study emphasizes the need for educating both the genders which would provide the opportunity to not only make more decisions but more effective decisions.

Tibandebage (1995) conducted a study of 183 purposely sampled, married women living in Salaam City, Tanzania, to examine the determinants of their household status. The findings of the study show that the wife's educational level and her income contribution to household expenses significantly increase her participation in household decision making and increase her husband's participation in domestic work.

Johnson-Sirleaf (1997), a candidate for the presidency of Liberia, has stated her belief that "Women's vision for their societies are often different from men because they understand clearly the impact of distorted priorities on their families and communities. The vision of women is one of inclusion, not exclusion; peace not conflict, integrity not corruption, consensus not imposition."

Nair (2001) concludes "evidence from Asia, Africa and Latin America confirms the positive impact of control by women of household expenditure, calorie intake and anthropometrics indicators. At the level of individual households, households where women control a large share of the income are more likely to meet calorie requirements compared to those which do not. This invariably, leads to better childcare and nutrition. A study in Brazil has also indicated that the probability of a child surviving in urban Brazil is almost 20 times more when portion of household income accrues to women rather than to men."

STUDIES AT NATIONAL LEVEL

Arya (1964) studied the decision making in Nagloi block in Delhi and reported that younger age-group of male family heads depended more on female family members for decision-making. As the age of the male family heads advanced, there was a greater tendency to consult sons and hence the importance of female members decreased. However, the female members, especially the wives, continued to influence decisions regarding home improvement, irrespective of age of family heads.

Mulay, Singh and Lokhande (1967) studied the decision-making pattern of families in Kanjhawala block of Delhi and concluded that women in nuclear families were consulted to a significantly greater extent in decisions pertaining to cropping pattern, adoption of improved agricultural practices, agricultural marketing and agricultural financing than their counterparts in the joint family.

Sharma and Singh (1970) have found that in issues concerning seed storage, care of animals, selection of seed and time of selling produce-wife and husband decide jointly. Husbands alone decide about application of fertilizes and use of weedicides. Age, education, caste, type of family and urban contact do not affect the extent of participation in decision making while social participation and size of holding significantly affect extent of participation in decision making.

Puri (1971) conducted a study in Mehrauli block of Delhi and revealed that women play an important role in decision-making in areas like marriage of children, education of children, expenditure pattern, savings, family planning etc. The study further revealed that women were also consulted by men folk in areas like construction of house, farm-related tasks, household tasks and litigation, etc.

Goldstein (1972) in her case study in Bangalore observed that working women do not necessarily maintain full control over

their incomes. Being employed and earning does not automatically imply women's total control over their earnings. She discovered that 77 percent of employed highly educated women gave more than half of their earnings to their families. According to her study, for financial independence, it is important to have control over one's earnings.

Puri (1974) has found that decisions regarding the number of cattle to keep, selling of milk products, feeding, milking and making and selling milk products are made mostly be wives. But decisions on treating sick cattle and burying and selling of cattle are pre-dominantly made by husbands.

Singh (1975) has observed that establishment of nuclear families as a result of women's employment is creating woman friendly environment where they have greater chances for exercising their wiles. His study suggests that joint families restrict the freedom of women with regard to movement outside home, decision making in financial matters or running the household.

Wood (1975) conducted a study of middle class women of Gujarat and found that women participate in the decisions concerning such issues as their husband's job, shifts in residence and their children's schooling.

Nagre (1976) analysed the role of women in decision making process in Parbhani district (Maharashtra). It was observed that the participation of women in decision-making was the highest (81 percent) in storage and sale of produce. Women participated jointly with their husbands in deciding the cropping pattern in only 15 per cent of the cases, while women's involvement was meagre (only 2.5 percent) in decision-making regarding choice of seeds, use of chemicals, fertilizers and adoption of plant protection measures, etc.

Nathan's (1977) study is a partial replication of an earlier study by Davis who studied the dimensions of marital roles in

consumer decision making in the planned purchase of two major consumer goods-automobiles and furniture. The original study has been conducted in the late 1960's in Chicago whereas this study examines husband-wife roles in consumption decisions in the family in the Indian context (for the same products-automobiles and furniture). Despite significant differences in the timing of the two studies and also in the cultural and social context in India and the US, this study finds the pattern of influence of husband and wife in important purchase decisions to be essentially similar to that of Davis. Thus in both the studies husbands show higher influence in allocation decision and wives in product selection decisions.

Hira Nand (1979) conducted a study in Haryana state and found that in settling marriages, purchase and sale of animals and in the education of girls, women were frequently involved in the process of decision-making.

Dhillon (1980) conducted a study of decision making pattern of rural woman in Mangat block of Ludhiana district in Punjab. He concludes that women have a greater say in matters of purchasing households goods as compared to farm issues. Women hold ranks of second and third importance for purchase of luxury items. Women are nearly wholly responsible for dairy but their contribution on the farm sector is relatively low. The men have less confidence in their wives for matters pertaining to the farm. Rural housewives participate actively in decisions relating to social ceremonies and exchange of gifts. Decision making for exercise of political right of voting is regarded as an exclusive male preserve.

Leonard and Leonard (1981) have reported that in Andhra Pradesh, a higher proportion of women participate in decisions regarding family expenditure than among Tamil Women.

Unlike Singh, Achanta (1982) reports that decision making is important because much of success of farming depends upon

how well the family makes decisions. Now-a-days women help in decision making with regard to farm practice operations. Wives and mothers have a considerable part to play in decision making in home related decisions.

Rao and Rao (1982) in their study conclude that no major family decisions are made without obtaining a consent and permission from women. However, employed women exercise more decision making power in matters of investment and budget control than the unemployed ones.

Bajwa (1984) reports that percentage of women having say in decision making is higher for food items to be used, purchase of clothes for children and parents, meal planning, sanitation and cleanliness, medical consultation during pregnancy, child rearing. Practices including their immunization and arrangement for ceremonies. Decisions relating to children's education, marriage and dowry are taken jointly by the husband and wife. However, women have practically no say in decisions relating to saving loan transactions and purchase of land.

Singhal and Munjal (1986) observe that in majority of the cases the decisions are independently taken by men in nuclear families (65.5 percent) and jointly with other members in joint families (64.10 percent). Women's participation in decision making is the least in both the types of families. In joint families husband, wife and elders together take the decisions (25 percent) as compared to nuclear families (18 percent). The pattern seems to suggest that as families become nuclear, the role of older parents as decisions maker tends to decrease and men's role as decision maker gains importance.

Kaur (1987) has found that the majority of the women respondents are involved in decisions relating to giving dowry. In education of children (42.1 percent) women are consulted followed by taking loan for consumption expenditure (29.1 percent), joining craft center (22.6 percent) and availing health services (14.2

percent). Women are the sole decision makers in areas such as food, nursing mothers and food to be given to children. In deciding about expenditure pattern, males are the main decision makers.

Aggarwal (1988) has studied the problems of status and role of middle class educated earning women in the Indian family. She concluded that though husbands and parents-in-law favour employment of educated wives and daughters-in-law and co-operate with them in discharging this new role, yet they are not inclined to assign them equal status in the family. The change in the status of educated women in the family does not lead to a change in their traditional role.

Girriappa (1988) in his study in Dakshina Kannada, Karnataka has made comparison of decision making, working, living conditions across different activities in both the rural and urban households. According to him status of women has been undergoing a continuous change in recent years. In both the type of families, the participation of women in decision making has been increasing.

Ghosh and Adhikary (1988) in West Bengal observed that the women are still getting very low importance in decision-making process except in the activities like borrowing money, seed storage and some of the practices related to livestock, like determining the size of livestock, type of livestock to be raised, selling time of livestock and care and weaning of calves etc.

Sinha and Prabha (1988) have examined the status of working women in blue collar and white collar occupations. Though most of the decisions are taken jointly by husband and wife, the former enjoys upper hand in some cases. Women engaged in white collared jobs enjoy greater decision making power in respect of children's education but have lesser say in economic activities.

Kumar (1990) in his study concluded that both the husband and wife have equal role in decision making process. While the

husband takes decisions on matters such as taking loan and marketing of products, the wife takes decisions on purchase of household commodities. Housewives have an important role in decision making.

Thakur (1995) conducted a study in Chowk, a village in Mandi district of Himachal Pradesh. She has studied the relationship between female work participation rates and their decision making power. She concludes that economic independence does not automatically elevate the status of a woman. The authority of taking decisions remains under the domain of elders who may be her husband or parents-in-law in the family, irrespective of the fact whether the family is joint or nuclear and the female is economically independent or not. The reason for this can be attributed to the fact that majority of the respondents in the study were engaged in family affairs and hence had no independent economic status. Secondly, they have taken up jobs not to become economically independent but to supplement the incomes of their families or just as their way of life.

Sharma (1998) studied the empowerment status of the women in the management of farm-households in Nanital district of U.P. The objective of her study was to find out the extent of women's involvement in the decision process. She concluded that women's independent involvement in economic decisions was very low in the area of household, farm and livestock management. Independent technical decisions were taken independently by very few women and that too only partially. Money in the family was managed by only 43 percent women and that too with the help of family members. Majority of them had no control over their earnings. Only 45 percent of them sometimes got the freedom to use their income, some of it freely, while 34 percent have no freedom at all to spend money. Women disclosed that they are not consulted when any decisions for property settlement are taken.

Tripathi (1999) studied the role of women in the hill economy of U.P. and their participation in decision making process. She observed that the role of women in an economy depends on both sharing of work i.e. their contribution in the economic activities of a household and their participation in the decision making process too. The study concludes that more than 2/3rd decisions of the family are taken by the head of the family without taking any advice from the housewife.

Gracy and Suryaprakash (1999) studied the relationship between women empowerment and decision making in the southern dry zone of Karnataka. The study concludes that the women from lower economic strata are more empowered because of the fact that they earn cash income and therefore have a better role in decision making too. The women at the large farms, though empowered in terms of education and personal possession of assets, play less significant role in decision making in farm and household matters.

Tuteja (2000) tried to gain some insight into the contribution of female workers to family income in the farm households of rural Haryana and their corresponding status in the family. The districts chosen were Ambala and Bhiwani. Female agricultural workers were found to contribute significantly to the household income on farm of all sizes and their earnings were found most crucial for the landless and small farm households. The proportionate contribution of the females declined with increase in the farm size. Only the women belonging to land owning classes enjoyed some financial powers to use their earned money to some extent. Female workers from small and landless households usually surrendered their income to the family pool and had no freedom to spend their earned money. To conclude, the female agricultural workers do not enjoy the status commensurate to their involvement in the household as a worker.

Ghosh (2000) reported that as male income increases, personal forms of consumption increase. These consist of alcohol, meals taken outside, cigarettes, dating with females etc. On the contrary, women spend higher part of their income on children, their nutrition and items of collection and household consumption.

Sen (2001) observes in this regard, "Empowering the voices of young women will help in reducing the fertility rate and thus help lower population growth as well. Once a woman becomes a wage earner, the cost of having another child increases by the amount of income the women has to forgo during pregnancy and child care, thus acting as a disincentive for having more children. Moreover, women acquire stronger voice in decisions concerning everyday life." Thus, Prof. Amartya Sen emphasizes the role of women autonomy for success in fertility reduction.

CONCLUSION

The empowerment and autonomy of women and the improvement of women's social, economic and political status is essential for enabling them to be competent decision makers in all walks of life. In fact, it is a two way process–*empowerment of women will make them better decision makers and lead to improvement in women's status which will further empower them.* This *circular process* will help in the achievement of all round sustainable development in a country. However, existing power relations prevent women from leading fulfilling lives and operate at many levels of society, from the most personal to the highly public. Achieving the goal of equal participation of women and men in decision making will provide a balance that more accurately reflects the compositions of society and is needed in order to strengthen democracy and its proper functioning. Equality in decision making performs a leverage function, women's equal participation in social and political life plays a pivotal role in the general process of the advancement of women. Women's equal participation in decision making is not only a demand for simple

justice or democracy but can also be seen as a necessary condition for women's interests to be taken into account. Without the active participation of women and the incorporation of women's perspective at all levels of decision making, the goals of equality, development and peace cannot be achieved.

Despite the long standing recognition of the fundamental right of women and men to participate in political life, in practice the gap between de jure and de facto equality in the area of power and decision making remains widespread. As a result, women's interests and concerns are not represented at policy making levels and women cannot influence key decisions in social, economic and political areas that affect society as a whole. Initiatives and programmes aimed at women's increased participation in decision-making have been hindered by a number of factors, including a lack of human and financial resources for training and advocacy for political careers and accountability of elected officials for promoting gender equality and women's participation in public life.

There is vast literature available at all levels-regional, national and international regarding women's decision making power. A brief analysis of some significant studies at international level conducted on the issue of decision making by women does indicate that the role of women in major areas of decision making has increased over time. Now most of the decisions are taken with the consent of women. It is also observed that women are better managers than men and instinctively employ their managerial skills for the betterment of the household if given a role in decision making. Further, working women vis-à-vis non-working women have greater say in decision making largely due to their direct contribution to family income. These studies also lay stress on the educational status of woman. Women education is a primary necessity for preparing competent decision makers. Education empowers women and they become more confident and effective decision makers.

Most of the studies at national level reveal that most of the decisions are taken jointly by men and women but women have practically no say in the major decisions. The family type, education and employment status also affects the decision making power of women. Some studies, for example Thakur, explains that though woman is economically independent, yet decision making power is still in hands of menfolk. It means that their economic independence is just for the betterment of the family and not for their own status or power. Amartya Sen has also made a strong case for economic independence of women. Among other things, he opines, that this will help in reducing fertility rate and checking population growth in developing countries.

These present review shows that the role of women in decision making has taken new dimension i.e. her role in family and economic sphere has significantly increased. With the empowerment of women, male dominated society is slowly accepting that women's support is necessary for proper development of family. In some domestic areas, she has procured equal or even dominate decision making power. But in more crucial areas, she is still far behind the man. It can be concluded that though man thinks that woman should go outside and earn for the family. But when it comes to equal rights or equal say in every field, it is in reality, very rare. At times woman herself, thinks that man should have main role and woman should follow him. In reality, though woman has attained economically, financially independence, yet her role is traditional.

Thus, to conclude, it can be said that woman's role in decision making has been increasing overtime. Yet traditional perceptions and attitudes dominate the household even today. This is all the more true in case of traditional developing societies. Women's participation in decision making has two dimensions-quantitative and qualitative. Quantitatively, her participation in growing all over the world. This is certainly encouraging but it must not be forgotten that woman's participation in terms of mere numbers will not serve the purpose. We must insure increased participation

of educated and knowledgeable woman who can put the given power to proper use for the real development and betterment of nation in general and of women folk in particular.

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Ethnicity, Female Income, Drug Abuse, and Labour Force Participation in Urban India

Santosh Nandal

There still tends to be an impression that the abuse of drugs is something of a marginal issue for women. But nothing could be further from the truth. This is because women themselves are using drugs. The vast majority of women in India use some type of drugs on a regular basis. They use prescription and over-the-counter drugs to help them sleep, stay awake, alleviate pain, cope with depression, etc. They drink coffee and tea, eat chocolate, all of which contain caffeine. Yet when one think of "women and drugs" what comes to mind are users of illegal drugs, although in reality less than 5 per cent of women use such substances on a regular basis.

However, the aim of this paper is to explain and predict women's behaviour and to explore and describe the impact of drug abuse on their lives and income . The paper focuses on low income urban Scheduled Caste women in Delhi, a city in the northern part of India. Scheduled Caste households are non-pooling and the household responsibilities of scheduled caste women are defined to include providing, as well as preparing

many of the consumption goods of a household. The aim is to document women's experiences in intra household relations in a particular socio-economic and ethnic context to contribute to the discussion on the impact of drug abuse on women's economic power and fallback position within the household. This paper will argue the facts based on empirical data from the study carried out in Delhi, India, amongst urban scheduled caste low income women. The paper will try to probe the impact of drug abuse, both positive or negative, on their lives and income.

Women and Drug Abuse

Any aspect of society in the present development perspective can best be analyzed and explained in the background of its casual framework in historical perspectives. The current development analysis in Indian economy inevitably needs the reference or image of women in the past. There was a clear division of labor based on the gender. The man of the family, as 'breadwinner', was primarily involved in productive work outside the home, while the woman as the housewife was involved in the organization of the house hold. The early feminist movement of the late 1960s and early 1970s called attention to and encouraged women's participation in many activities in which they had been absent or invisible. It also opened a range of occupations that had been the exclusive or nearly exclusive domain of men. Since tiine immemorial women have contributed and played a key role in basic life support system. Without their participation, it is not possible to achieve the goals of community upliftment. In present world, women contribute both in home and outside economy. She takes care of members of the household as well as works out side the home. The scheduled caste women are culturally expected to engage in productive activities and earn an income to contribute to the upkeep of their household. But the increasing tendency to take drugs among these women seems a hindrance in social and economic progress. The issue of drug abuse that has been identified

as weaknesses of women is difficult to be understood within our cultural system and rich traditions of India. Despite the natural differences between men and women, the individual tastes and preferences of both, still the habit of drug is increasing among women. There is also the failure to recognize the systematic system in the country. Now the question arises, why these women are attracted to this drug abuse?

The scheduled castes are a collection of castes that suffered the socially oppressive practice of untouchability. In urban areas, a large proportion of workers in un-organized sector are from the scheduled castes. The scheduled caste women society is a patriarchal one but the general assumption about women staying at home to care for the home and children do not hold for the women. This is because these women are customarily expected to earn an income of their own from which a substantial proportion of household expenses may be met. The household responsibilities of these women are defined to include providing as well as preparing many of the important consumption goods of household.

Field Study

A combination of qualitative and quantitative methods of data gathering was used in investigating the livelihood strategies and household gender relations among low-income Scheduled Caste women in Delhi, the capital of India. As Laeir (1997) noted, combining quantitative and qualitative method is a useful way of both exploring issues in depth and obtaining a broader picture to generalize from. For example, a qualitative analysis will allow for the exploration of how norms and practices are shaped and continuously reshaped which is not possible with a quantitative method.

In 2004, data was collected from a micro level study which used a qualitative approach of the profiles of 191 low income Scheduled Caste women. The questionnaires were administered

on these women to gather mostly descriptive data on their social and economic position while in depth interviews were conducted to explore issues arising from their responses to the questionnaire. The age of these women ranged from 25 to 59 years and they all were engaged in various income-generating activities in Delhi.

The findings from the study are succinctly discussed below with tables showing the characteristics of the women respondents. It was found that most women (91.1%) were in the 30-54 years age group and (8.9%) were in the 25-29 years and 55-59 years age group i.e. most of these women were in prime of their working life (Table 1). Regarding the income generating activities, majority of the women were engaged in trading (31.94%), teaching (21.99%) and (14.14%) as housemaid and the remaining (31.93 %) were engaged in other categories which is shown in (Table 2). Regarding the educational status, 31.94 per cent had no education, 19.37 per cent had education up to primary level, 9.95 per cent up to middle level, 14.14 per cent were matriculate, 8.90 per cent had secondary education, 9.95 per cent did nursing, 3.66 per cent were training and 2.09 per cent had education up to college level (Table 3).

TABLE 1

Distribution of the women respondents according to age group

Age group	*Number*	*Percentage*
25-29	12	6.3
30-34	33	17.3
35-39	56	29.3
40-44	44	23.0
45-49	24	12.6
50-54	17	8.9
55-59	5	2.6
Total	191	100.0

TABLE 2

Age group and income generating activities of women respondents

	Nature of Occupation								
Age group	*Trading*	*Hair-dressing*	*Tailoring*	*Catering*	*House Maid*	*Admin work*	*Teaching*	*Nursing*	*Total*
25-29	7					2	1	1	12
30-34	13	2	2	2		4	8	2	33
35-39	11	7	3	2	11		15	7	56
40-44	14	2	8		8		10	2	44
45-49	8	1	4		6		4	1	24
50-54	7	1	1		1	2	4	1	17
55-59	1				1	1		2	5
Total	61	14	18	4	27	9	42	16	191
Per cent	31.94	7.34	9.42	2.09	14.14	4.71	21.99	8.37	100.00

TABLE 3

Age group and level of education of women respondents

Age group	*None*	*Primary*	*Middle*	*Matric*	*Secondary*	*Nursing*	*Training*	*College*	*Total*
25-29			1	6	2	1	1	1	12
30-34	15	4	4	2	3	3		2	33
35-39	8	22	8	5	3	5	4	1	56
40-44	19	3	1	7	7	7			44
45-49	11	5	2	2	2	1	1		24
50-54	6	2	2	5		1	1		17
55-59	2	1	1			1			5
Total	61	37	19	27	17	19	7	4	191
Percent	31.94	19.37	9.95	14.14	8.90	9.95	3.66	2.09	100

TABLE 4

Age group and wake up time of women respondents

Age group	*Very early*	*Early*	*Late*	*Very late*	*Total*
25-29		6	4	2	12
30-34	1	22	9	1	33
35-39		38	16	2	56
40-44	2	32	10	44	
45-49		17	7		24
50-54		9	8		17
55-59		3	2		5
Total	3	127	56	5	191
Percent	1.57	66.49	29.32	2.62	100.00

Very early: 5-5.30 a.m.; Early: 6-6.30 a.m.; Late: 7-7.30 a.m.; Very late: 8.00 a.m. and later.

TABLE 5

Age group and bed time of women respondents

Age group	*Very early*	*Early*	*Late*	*Very late*	*Total*
25-29		2	5	5	12
30-34	3	4	19	7	33
35-39	2	12	32	10	56
40-44	1	6	28	9	44
45-49		2	18	4	24
50-54		4	10	3	17
55-59		3	2		5
Total	6	30	117	39	191
Percent	3.14	15.72	61.12	20.42	100.00

Very early: 8-8.30 p.m.; Early: 9-9.30 p.m.; Late: 10-10.30 p.m.; Very late: 11.00 p.m. and later.

The practice among the scheduled caste women is that women's ability to travel outside the cities is restricted due to the reason that their domestic responsibilities will suffer. Much depend on the willingness of the husbands to give what is generally regarded as a rare "privilege" to their wives to travel out of their homes if the need arises. Also, the belief among women that domestic activities are women's responsibilities is resilient and does not change with women's involvement in full time income generation. This has resulted in the women sleeping late in the night and waking up very early in the morning to ensure that they do the household chores. The wake up time for women in the morning and sleep time in evening is summarized in (Tables 4 and 5) above. Majority of the women respondents (66.49 %) wake up early in the morning and (61.12 %) go to bed late at night. According to the women, their children and female relatives e.g. mothers, mothers-in-law and sisters often assist them in carrying out domestic activities. Some of the women explained that they struggle to employ domestic labour to carry out these activities, but this brings increased financial and social responsibilities. Among these women, domestic activities are believed to be the sole responsibilities of women and snide remarks are made about men who perform what are believed to be women's duties.

Regarding the drug abuse and cause of drug abuse, the data (Table 6 and 7) shows that 89.01 per cent of women respondents are habitual of smoke (*bidi*) and 10.99 per cent take sleeping pills to release tensions. It was found that majority of women respondents (71.20 per cent) were suffering from frustrations, 3.14 per cent with stress and 25.66 per cent were the victims of anxieties. These women were now facing many of the same frustration, anxieties and stress-inducing factors which have long pushed men to drugs as means of seeking escape or comfort, or merely of coping with reality. More women are working of such places where the stressful and tiring environments tend to lead to

occasional use and subsequent abuse. The social bonhomie with drug after a hard day's work has extended to women as part of a climate of equality – for example, in Norway it has been found that working women drink twice as much alcohol as non-working women.

TABLE 6

Age group and drug abuse (smoking, sleeping pills) among women respondents

Age group	*Smoking*	*Sleeping pills*	*Total*
25-29	8	4	12
30-34	30	3	33
35-39	48	8	56
40-44	40	4	44
45-49	22	2	24
50-54	17		17
55-59	5		5
Total	170	22	191
Percentage	89.01	10.99	

TABLE 7

Women respondents and cause of drug abuse

Age group	*Frustration*	*Anxieties*	*Stress*	*Total*
25-29	5	3	4	12
30-34	21	2	10	33
35-39	49		7	56
40-44	33		11	44
45-49	13	1	10	24
50-54	11		6	17
55-59	4		1	5
Total	136	6	49	191
Percentage	71.20	3.14	25.66	100.00

TABLE 8

Effects of drug abuse on women respondents

Effects of drug abuse	*Number of respondents*	*Percentage*
Broken homes	10	5.29
Lost jobs	25	13.09
Economic slack	19	10.00
Shame and stigma	137	71.62
Total	191	100.00

Regarding the effects of drug abuse on women, it seems that there is much effect on their lives. Out of these 5.29 per cent of the respondents complained of broken homes, 13.09 per cent lost their jobs, 10 per cent were victims of economic slack but majority of respondents, i.e. 71.62 per cent said that taking drugs (*bidi*) is a stigma on them and they feel ashamed of taking these drugs. But it was found that they had started smoking and taking sleeping pills to cope with home and outside working activities, but now they have become habitual of these drugs.

A woman, Sunita (Aged 45 years) has moved out of her husband's home because he was not supporting her and her children and she had to feed him and the other women he brought into the house. She believes she is better off alone with her children. But to cope up with stress, she has become habitual of smoking (*bidi*) and sleeping pills. Sunita explained that she prefers to be alone with her children to being with her husband as she has less problems and responsibilities to face. According to her: "Scheduled Caste women say that the husband is a "crown" for the wife but when he is not playing that role and at times even brings in another woman to add to your burden, I believe the best thing is to move out, stay alone with the children and face life squarely. This way, everybody will know that you do not have a husband and that you are struggling alone to meet their needs and yours. This is what I have done and I am happy with that

decision and my situation". Sunita is one of the 10 (5.29%) respondents who are either separated or divorced from their husbands.

It was also observed that all the women resent the notion of man as the "breadwinner" that is prevalent within the society, as they are recognized as making meaningful contribution to the upkeep of the household: the man is assumed to be responsible for everything. For example, one of the respondents, Rajo complained that, "everything a women has within our society is attributed to the husband even when jointly owned by the couple". The assumption that everything in a household solely belong to the husband is deeply rooted in the "man the breadwinner" syndrome, which is presented by the women as earlier discussed. This presents a contradiction between men's and women's traditional roles within the household. When scheduled caste women are customarily expected to earn an income of their own from which a substantial proportion of house hold expenses may be met, the husbands are still believed and in fact seen to be the sole "breadwinner".

DISCUSSION AND CONCLUSION

The issue of women's behaviour, drug abuse and female income has been identified as important factors as determinents of stress, anxieties and frustration among women. An important additional stress factor for many women is the delicate juggling act that they have to perform between work and other responsibilities. Despite some of the strides that have been made, women remain the primary caretakers and nurturers in society. The "superwoman syndrome" has led many women to over-extend themselves in trying to do it all—a successful career, marital harmony, well-adjusted children, caring for elderly parents, an active social life and participation in community service. Women's increasing participation in income generating activities and wage employment does not exempt them from household work (Khan,

1999). The women workers woke up earlier and slept later than the male members of the household. Many women have burned out in the process, with some turning to drugs.

Scheduled caste women are high consumers of drugs and have a high rate of addiction to drugs such as sleeping pills and smoking (*bidi*). Naturally, the cascading negative effects of substance abuse on all the various roles that women undertake only serve to make their problems worse.

The effects of drugs on women is also colossal. Women bear the brunt of "managing" substance abusers in the family. Violent and abusive behaviour are no strangers to women involved in a relationship with an active abuser. Broken homes, lost jobs and picking up the economic slack of an abusing breadwinner squandering precious earnings are all classical scenarios that women have had to cope with throughout the ages. Although saddled with more and more responsibilities, women who try to rationalize the behaviour of a substance abuser often end up psychologically depleted and physically exhausted, thereby increasing the "dysfunctional" family atmosphere which is so detrimental to its members. And yet, traditionally, women have suffered their lot silently and accepted the shame and stigma associated with having an abusing and abusive family member. Despite their participation in income generating activities and control of the income by the women, the cultural norms and gender ideology, which is prevalent in the society, were still at work to influence and shape the behaviour of the women. These disconcerting realities, combined with the fact that 30 per cent of the world's households are headed by women, underline the urgency of focusing on the effects of drug abuse on women.

Moreover, very few research have been done on women's behaviour. Instead, most conventional research focuses on a relatively small group of women whose drug use becomes visible, therefore problematic. They use illegal means to earn enough

money to buy (expensive) drugs. As a result of their illegal activities they come into contact with the criminal justice system. They are often poor, under skilled, under educated, and supported by public assistance. They have difficulty taking care of their children and as part of the welfare system, come to the attention of social service agencies designed to protect children. Some have no real home and as a result much of their existence takes place "on the street." Most important, they incite fear because they deviate from sexual norms and in general violate traditional gender role expectations with regard to pregnancy and parenting.

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Empowering Women Through Information and Communication Technology

Haseen Taj and Mahesh Bhargava

The Office of the United Nations High Commissioner for Human Rights has defined empowerment as the process of giving people the power, capacities, capabilities and access needed to change their own lives, improve their own communities and influence their own destinies. "It is a process which enables a person to understand the working of power so that they can deal with questions of existing power and exercise control over the sources of power.

Empowerment has multiple, interrelated, and interdependent dimensions—economic social, cultural and political. It can be understood in relation to resources, perceptions, relationships and power.

Empowerment, in the context of IFUW's Study and Action Programme involves enabling women and girls to hold legitimate positions of authority and to influence other—in other words to become leaders. Globalization has a negative impact on women when it pushes women to a marginal position, violating their human rights. Women must find ways to empower themselves to

fight imbalance in society, and to participate equally in the ongoing process of development. When women feel they can operate in society on the same terms as men, then one can call women empowered.

Even though globalization has been identified and encouraged by the West with its economic and technological power, it is not synonymous with westernization. Empowerment means very different things to different groups of women, and varies according to the level of development in a particular society. The potential for empowerment varies, both according to region and economic position. Every NFA should endeavour to decide for itself what empowerment means for women in the context of its own culture.

Generally, the term Information and Communication Technology (ICT) has been used to encompass technological innovation and convergence in information and communication that is transforming the world into so-called information or knowledge societies.

ICTs are collectively defined as innovations in microelectronics, computing (hardware and software), telecommunications and opto-electronics micro-processors, semiconductors, fibre optics that enable the processing and storage of enormous amounts of information, along with rapid distribution of information through communication networks. Linking computing devices and allowing them to communicate with each other creates networked information systems based on a common protocol. This has radically altered access to information and the structure of communication-extending the networked reach to many parts of the world.

In this paper, ICT is defined as technologies and tools that people use to share, distribute, gather information, and to communicate with one another, one on one, or in groups, through the use of computers and interconnected computer networks. They

are mediums that utilise both telecommunication and computer technologies to transmit information.

Are ICT's, Contributing to Gender Equality and Women's Empowerment?

The following are the most critical in achieving gender equality:

Access and Control: Women's access to ICTs and control over them is not equal to men's. When considering the way in which ICTs are allocated between women and men (the 'gendered' allocation of ICTs) it is important to look at the difference between access and control. Access is the opportunity to make use of ICTs meaning not only technology but also information and knowledge. Control refers to the power to decide how ICTs are used, and who has access to them.

Women's access to ICTs and control of them (or lack thereof) is dependent on many factors. Factors such us gender discrimination in jobs and education, social class, illiteracy, geographic location (North or South, Urban or Rural), influence the fact that the great majority of the world's women have no access to ICTs or to any other sort of modern communication system, and possibly will not in their lifetime. It is logical to deduce that as information dynamics accelerate their migration towards the Internet, people without access are bound to suffer grunter exclusion.

But there are also voices that insist that connectivity in itself is not enough, and that the know-how is equally or more important than the access itself. Criticism has been expressed of ICT development programs that all too often concentrate excessively on access to technology and information sources, as though it were sufficient to provide women with computers and modems for them to resolve their development problems.

Education, Training and Skill Development: Education, training and skill development are critical to ICT interventions, Illiteracy rates for women in developing countries are far higher than the percentage of men. Training methods are often 'ad-hoc,' alienating and not customized to women's needs. Learning practices for women should be extended to girls and women, made gender-sensitive (making training women-specific, ensuring ongoing user support, and mentoring in the communities where women live) and deepened (for women as users, technicians, policy fund change-makers). Moreover, training programs for women should focus not only on how to use the technology and software, but also on how to find, manage, produce and disseminate information, and how to develop policies and strategies to intervene effectively in and make use of this new medium.

Other major concerns are illiteracy and language as obstacles to information access, the need to break down gender and cultural barriers to women's access to careers in technology, and the design of software, that often does not respond to the needs of women and girls.

Industry and Labour: In the ICT industry, labour is highly sex-segregated. Women are found in disproportionately high numbers in the lowest paid and least secure jobs. The gender dimension of ICTs also affects tetework, flexi-time, and work from home arrangements where women have few rights, meagre pay, and no health, social or job securities. A woman's wage-labour outside (or inside) the home as a result of the new technologies does not entail a change in the family division of labour. Men still get out of doing the housework, and women find themselves with dual or triple burdens. Poor working conditions, long-hours and monotonous work routines associated with ICTs are often injurious to women's health.

Technological changes affect, the quality and quantity of women's work. Along with women's employment benefits from

new technologies, there are associated health, environmental and other costs. Employment issues or concern to women working in technology relate to contractual terms, intensification of workloads, wages, training, health and safety such as VDU hazards and repetitive strain injuries.

On average, women are paid 30-40% less than men for comparable work. In its employment report released in January 2001, the ILO reveals a "digital gender gap" with women under-represented in new technology employment in both developed and developing countries. The ILO report also finds that patterns of gender segregation are being reproduced in the information economy. The report add, "Although pay inequality exists between those who have ICT skills and those who do not, pay polarization also exists within ICT use itself. This polarization is often gender based."

Content and Language: Women's viewpoints, knowledge and interests are not adequately represented while gender stereotypes also predominate the World Wide Web. Some of those concerns are an extension of those formulated previously in relation to sexism and portrayal of women in the media. But they also relate to a broader range of issues such as the need for women to systematize and develop their own knowledge and perspectives and make sure they are adequately reflected in these spaces.

The dominance of English language content, often from countries of the North, on the Internet is also a major concern raised by women's organizations. Language barriers to information access require the development of applications like multilingual tools and databases, interfaces for non-Latin alphabets, graphic interfaces for illiterate women and automatic translation software.

Power and Decision Making: Although women are acceding in ever-greater numbers to jobs and expertise with ICTs the same is not necessarily true of their access to decision-making and control of the resources. Whether at the global or national levels,

women are under-represented in all ICT decision-making structures including policy and regulatory institutions, ministries responsible for ICTs, boards and senior management of private ICT companies. One problem is that at both the global and national levels, decision making in ICTs is generally treated as a purely technical area (typically for male experts), where civil society viewpoints are given little or no space, rather than a political domain. Deregulation and privatisation of the telecommunications industry is also making decision-making in this sector less and less accountable to citizens and local communities further compounding decision-making and control of resources for women.

Facts on Women's Empowerment

- Women are the poorest of the World's poor, representing 70% or almost 900 million-of the 1.3 billion people who live in absolute poverty.
- Two-thirds of the World's illiterate population of 876 million.
- Between 1987 and 1996, the number of female ministers in national governments worldwide increased two-fold-from a mere 3.4% to still just 6.8%. As of 1996, 48 countries had no female ministers in their national government at all.
- As of March 2002, women held just 14.2% of representative posts in national parliament around the World. As of 1999, women occupied more than 30% of parliamentary positions in just five countries worldwide. In 31 countries at that same time, they held less them 5% of positions.
- An estimated one in three women world-wide have been subjected to violence in an intimate relationship.

National Policy for the Empowerment of Women-2001 in India

The principle of gender equality is enshrined in the Indian Constitution in its Preamble, Fundamental Rights, Fundamental

Duties and Directive Principles. The Constitution not only grants equality to women, but also empowers the State to adopt measures of positive discrimination in favour of women.

However, there still exists a wide gap between the goals enunciated in the Constitution, legislation, policies, plans, programmes, and related mechanisms on the one hand and the situational reality of the status of women in India, on the other. This has been analyzed extensively in the Report of the Committee on the Status of Women in India, "Towards Equality", 1974 and highlighted in the National Perspective Plan for Women, 1988-2000, the Shramshakti Report, 1988 and the Platform for Action, Five Years After- An assessment"

Gender disparity manifests itself in various forms, the most obvious being the trend of continuously declining female ratio in the population in the last few decades. Social stereotyping and violence at the domestic and societal levels are some of the other manifestations. Discrimination against girl children, adolescent girls and women persists in almost every part of the country.

The underlying causes of gender inequality are related to social and economic structure, which is based on informal and formal norms, and practices.

Globalization has presented new challenges for the realization of the goal of women's equality, the gender impact of which has not been systematically evaluated fully. However, from the micro-level studies that were commissioned by the Department of Women and Child Development, it is evident that there is a need for re-framing policies for access to employment and quality of employment. Benefits of the growing global economy have been unevenly distributed leading to wider economic disparities, the feminization of poverty, increased gender inequality through often deteriorating working conditions and unsafe working environment especially in the informal economy and rural areas.

Among several policy prescriptions Science and Technology was considered as one of the main goals for empowerment of Women as stated below:

> "Programmes will be strengthened to bring about a greater involvement of women in science and technology. These will include measures to motivate girls to take up science and technology for higher education and also ensure that development projects with scientific and technical inputs involve women fully. Efforts to develop a scientific temper and awareness will also be stepped up. Special measures would be taken for their training in areas where they have special skills like communication and information technology. Efforts to develop appropriate technologies suited to women's needs as well as to reduce their drudgery will be given a special focus too."

Commonwealth Lauds India's Role in Women Empowerment

The Commonwealth Plan of Action on Gender and Development specifically mentions India among those countries where strategic actions have been taken to increase the critical mass of women in decision making. In the Secretary General's report, presented at the sixth conference of Commonwealth Ministers Responsible for Women's Affairs, the 84th Constitutional Amendment finds a mention under "good practices". As against this, India does not figure among the ten top reporting countries on Women's participation in the National Executive or Cabinet, and Parliament. While New Zealand tops the list with 30 per cent of women in its National Parliament or Assembly, United Kingdom is the lowest ranking in the list with 18 per cent women representation. India, on its part, had only 7.8 per cent women representatives in Parliament last year. The representation in the Cabinet was a mere 8.57 per cent as against the Gambia's 30.8 per cent, the highest in the top ten—and Antigua and Barbuda with 17.6 per cent.

In the context of the local Government's, however, India ranks third in the series with 33.5 per cent representation of women. Its record is bettered by Seychelles with a 54 per cent and Uganda with 40.8 per cent women representation. The report also mentions India's "committed and systematic approach" to mainstreaming gender in areas such as education, health, rural and urban development as well as community development. The "substantial outcomes", listed in the report, include the Women's Component Plan to ensure that no less than 30 per cent of the funds and benefits flow from other development sectors to women; an integrated approach to empower women through effective use of financial, physical and human resources in both women specific and general programmes find dissemination and enforcement, of guidelines on sexual harassment. While noting that economic empowerment of women and the availability of alternative employment are seen as "viable strategies" to be looked at by Governments in their search for ways to end violence against women, many countries are linking the exploitation of women and children to national programmes on economic development, poverty alleviation and employment creation.

India, the report records, has taken measures which include the provision of alternative, gender sensitive employment for the rehabilitation of sex workers and their children and the voluntary sector has initiatives to end the cycle of the commercial sexual exploitation of children. Even while India has to ensure effective action to its seemingly impressive fact-sheet, the report underlines the need for implementation of effective gender equality policies and programmes which "must go beyond words to action at policy, planning and operational levels".

Empowering Women Through ICTs In India

Communications technologies are important for the distribution of alternate, balanced and equitable portrayals of women and their potential. They are also important for facilitating

analysis of women's situation and developing active strategies to improve that situation. Karen Banks of Green Net makes the point that women's ICT activities take on a dynamic of their own that is, the activity is more of a movement, gathering momentum supported by a network of peers utilising ICTs for communication, coordination and information and experience sharing." They help women to develop confidence and experience in expressing their viewpoints publicly by allowing space for experimentation and enabling them to find a allies across communities, nations and regions. Two examples illustrate this: a woman in South Africa, recently working on a campaign for women's reproductive and health rights, posted a message to the APC Africa women mailing list concerning campaigns and information from other African countries. Women from two other African countries responded with information on precedent legislation which could help the advocacy campaign in South Africa. In another case, a Senegalese woman unable to find data locally on the number of women Ministers in African governments, contacted the international APC women's network through its mailing list. A women in Geneva with access to UN agency information was able to fax relevant information to Senegal, to that her colleague was able to use this information to support advocacy concerning women's participation in African governments.

Other advantages of ICTs for women include the much lower cost of publication, once the initial financial investment is made, which encourages women to articulate their views publicly. The new kind of communication space which ICTs introduce is decentralised, de-hierarchicalised and allows the instantaneous 'registration' of many voices and viewpoints. The result can be a hybridised, genuinely integrated product, with possibilities for new kinds of discussion. ICTs are allowing the development of alternative modes of communicating and acting which go beyond rhetoric into the exploration of new models for action.

Aside from strengthening women's voice, ICTs can benefit women in other ways. They can facilitate participation among women in different sectors and in different regions They can provide the information that women need to improve their own well being and that of their families, and to more efficiently fulfil their triple roles. The introduction of computers into offices has improved the quality of work life for women in clerical and administrative occupations. ICTs allow the exchange of views, opinions and news that might not be possible in other media under government censorship and control.

Economic Empowerment through Information Communication Technology: Women farmers can greatly increase productivity using information on improved technologies, agricultural inputs, weather and markets. Traders and other entrepreneurs, need to find marketing information and disseminate information about their businesses. Schoolgirls from the local communities who generally learn computer skills rapidly could be trained to serve as information intermediaries for the older women.

The new information economy offers many possibilities for new ICT-enabled businesses that women could establish or in which they could work. Most numerous are the service jobs outsourced by major corporations in the U.S. and Europe. At the low end of the skill level and largest in number are jobs in data entry and data capture. Software programming, GIS, and systems analysis jobs require much higher skills and education, but, women are moving into these jobs in several developing countries. While the business-to-consumer e-commerce area has generated a great deal of excitement, it can be a difficult field to enter. Women's handicrafts can find markets, but marketing and management skills are needed, and supply and delivery problems must be addressed. Some successful developing country e-businesses have targeted their diaspora markets and taken advantage of local delivery.

More profitable opportunities exist for women's small-scale enterprises in business-to-business and business-to-government markets.

ICT-enabled communications businesses offer much promise for women entrepreneurs, following the model of Grameen Phone in Bangladesh, téléboutiques in Senegal and Morocco, and phone shops in Ghana. Given high demand, low capital and skills requirements, these businesses are within the reach of many women in developing countries, if their country has the necessary enabling environment permitting the establishment of such businesses. Availability of credit, particularly in the form of microcredit, is a necessity for women to enter such businesses. While microcredit is increasingly popular, its availability falls far short of demand.

For employment in core sector information technology jobs, women in developing countries need to acquire the necessary training to move into more technical, better-paying, cognitively oriented jobs. While degrees in science and technology are the entry tickets to the higher end of using and producing information technology, women can master many aspects of computer use and maintenance with much less training, with much of it available outside the formal education system.

Women's Political Empowerment Through ICT: ICT is a forceful tool to improve governance and strengthen democracy. It is particularly powerful for giving a voice to women who so frequently in developing countries have been isolated, invisible, and without a voice. Information technology can contribute to the political empowerment of women as tools for networking women if, perform social and political advocacy, to strengthen women's participation in the political process, to improve the performance of elected women officials, to improve women's access to the government and its services, to educate, and to disseminate indigenous knowledge. ICT is particularly useful in

increasing the transparency of accountability of government, an application from which women can particularly profit.

CONCLUSION

Therefore, it is important to ensure that women's participation in ICTs be appropriate to their situation, perspectives and concerns. They should be supported in creating their own technological processes and abilities; virtual spaces free of harassment and supportive of non-traditional views of women's abilities; and content that supports their concerns and allows them to fulfil their productive, reproductive and community management roles more efficiently and effectively.

Representation is important in creating the conditions and regulations that will enable women to maximize their possibilities of benefiting from ICTs, and ensuring the accountability of the institutions that are responsible for developing ICT policies. This is important, in a number of spheres. One is to do with creating the conditions and regulations that will enable women to maximize their possibilities of benefiting from ICTs, and ensuring the accountability of the institutions that are responsible for this valuable resource.

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The Feminine Organization: As an Affirmative Action for Gender Bias at the Work Place

Ranjana Mittra

India Inc. can be proud of Naina Lal Kidwai and Indra Nooyi who seem to have risen effortlessly to reach the pinnacles of their profession, but then there are thousands of career women who stop just short of their full potential!

So, it seems gender biases are still ingrained in the workplace: physical appearances do matter, sexual harassment is not that uncommon, women are first homemakers and glass ceiling remains in the place. Today women in the workplace are on the rise in India with aspirations, ambitions and need for achievement. Even with limited level of success it has generated in them feelings of confidence, self-worth and self-esteem.

But it has also created doubts, anxieties and apprehensions in all the three players in the field - men, women and organization - as none had the experience of relating to each other on equal footing in a formal setting. And as the Indian woman still values her role and responsibilities of a homemaker she is faced with challenges of striking a work-life balance. This is much more of an issue with women than men. She has to now work twice as

hard as men. She works under constant pressure to harmonize her household duties and professional expectations.

Today organizations have become very diverse - diversity in terms of gender, race, age, sexual orientation and ethnicity - and both the work force and organization have to accept and adapt to it. The "melting-pot" approach to differences in the workplace have to be replaced by an immediate, acceptable attitudinal change to the idea that if one has come to join a profession they would somehow automatically assimilate. But no worker will set aside their cultural values and lifestyle preferences when they come to work. Therefore, the organization has to become accommodative to the new gender equation and other forms of diversity by addressing different life styles, family needs and work styles. The 'melting-pot' assumption is being replaced by the recognition and celebration of differences (Taylor, 1999). And interestingly, those who do celebrate the differences are finding that their organizations' profits are higher (Kuczynski, 1999).

Inspite of these encouraging and illuminating research findings, gender equality and the advancement of women at the workplace still remains a 'utopian dream!` In the United Nations General Assembly Special Session discussing "Women 2000, Gender Equality, Development and Peace for the Twenty-First Century", summarized that "...the commitments made by government of 189 states and despite advances women have made in many societies, progress made towards achieving gender equality has been slow and erratic:

- Women's concerns are still given second priority almost everywhere;
- Women continue to face discrimination and marginalization, both subtle and blatant, at home, workplace and society.
- Women do not share equally in the fruits of development;
- Women constitute 70 percentage of the world's poor (UNDPI, 2000).

Indian women have been glorified and given a place of reverence in the traditional heritage and culture, and equal status with men in the constitution, but even after 60 years of independence they have not been able to get the status and power that they rightfully deserve. But, the paradox is that in spite of their being placed in high and responsible positions, they are still, by and large, marginalized in most spheres and face discrimination and gender bias in having limited opportunities, resources and avenues of advancement open to them. Another hurdle in the path of their career goal is the traditional outlook and attitude of the Indian society where a woman is still expected to be a homemaker first and then a career woman. Despite all the developmental planning for women by the government and additional support given by various NGOs, women's empowerment and their status in professional careers have not yet received the due recognition and acceptance that it deserves.

The objectives of economic empowerment of women can be achieved only by opening the routes for training and development of their inherent capabilities, ensuring for them family and community support and working for an attitudinal change in the thinking of both men and women toward the career-oriented women. Women have to be endowed with productive resources like education, health, nutrition, family welfare and planning, participation in the decision-making process, both at the home and governmental level for them to be effective contributor to national development.

Women perform better at various educational and competitional levels but when they enter professional fields, they either do not make the expected progress or are assigned roles and responsibilities that are considered feminine or easy to manage. The women who do manage to enter promising professional career after all the struggles encounter gender bias, prejudice and traditional stereotypes at their workplace. Some of the common stereotypes that women face are:

- Women often leave to get married and have children, take maternity leave, require flexible work time, need crèches at the place of work for her children, leading to extra investment of time, effort and finance by the management.
- Women are more emotional whereas men are more rational, although the studies show that women are capable of taking more emotional stress than men.
- Women get ill more often, together with normal illness, women have their own peculiar problems, forgetting that men suffer diseases that are more prolonged, have higher debilitating effects like heart attacks, high blood pressure, stress, psychosomatic problems etc.
- Women do not get on well with other women, they are catty, try to put the other women down, would seek men's favour to reach the top etc., again forgetting that men are equally adept at all these qualities.
- Women do not delegate sufficient work or responsibilities to those under them but would like to hog the show to prove how capable they can be in a male-dominated workplace.
- Women are unable to handle difficult assignments, which is not true any more as women can be seen as boxers, wrestlers, fencers, space traveler, locomotive engine drivers, truck drivers etc.
- Women are unable to cope with extensive traveling, transfers, working overtime, and late nights, need escorts etc.
- Women are victims of pay disparities: they still earn less than men. Although significant progress has been made in terms of affirmative action for women it appears they have reached a plateau in the organization. The constitution gives equal rights to both men and women

and law prohibits any discrimination against keeping qualified women out of high positions, yet there appears to be a "glass ceiling" holding them down, and the justification is that women have not yet had enough experience to reach the top of the organization, they choose family over career, have lower self and - organization referent attitudes, do not manifest the same leadership skills as men and the excuses go on ad infinitum. But accumulating evidence shows that primary reason women leave their organizations is the lack of career advancement opportunities (Trost, 1990).

- And, finally, the greatest prejudice and stereotypes that women face is the degrading presumption that a women who steps out of her home for a career is inviting all kinds of sexual advancement and harassment. This problem is further aggravated in the unorganized sector where a large majority of untrained and vulnerable section of women works for basic survival. The fear of loosing the source of livelihood forces them to silently bear all type of sexual harassment of the employer. This issue started receiving the attention of the media, government and corporations in the 1980s because more and more women were opting for a career. In a landmark judgement, the Supreme Court of India on August 12, 1997 ruled that sexual harassment, whether verbal or non verbal, of women at the workplace will constitute a crime against women.

The marginalization of women in terms of their work status and working conditions has been rather more pronounced is the Indian context. For a woman to grow into capable and worthy partner in the progress of the organization she must have an atmosphere of dignity and sense of security at her workplace. Women's empowerment and upliftment can only become a reality

if suitable laws are passed and implemented strictly. The move to enforce the laws without fear or favour must be accompanied by a movement to bring about attitudinal change in society. The Indian government's National Perspective Plan for Women has proposals for reservations at different levels of jobs and governance, unprejudiced and healthy projection of women in media and provision for thoroughgoing legal safeguards. But, in spite of all these plan and policies, the debate on giving 33 percent reservations for women in parliament is not only surprising but tragic. It confirms the age-old double standards and prejudices against women which seem to be still strongly entrenched in the Indian men's psyche. This has led the various women's organization in the country to demand for an All India Women's Political Party! Will an all women political party or a feminine organization help in overcoming these gender biases and lead to an attitudinal change in the mentality of the society?

This is one of the controversial issues currently related to organization design, whether gender differences have created a preference among women for a feminine organization? With a view to answer this question this study was undertaken based on a feminine organization model proposed by organizational sociologist Joyce Rothschild (1994).

The Model

The beginning of 1980 saw the emergence of research by organization theorists to look for links between female values and structural preferences. The primary finding was that they preferred organizations that emphasized relatedness and connecting with other (Robbins, 1996). This is the result of the way in which women have been socialized for their role in the family, where values of supporting and nurturing others are taught, where protecting long-term relationships are emphasized and seeking solutions where everyone wins and mutuality of interest is encouraged. Organizational sociologist Rothschild (1991) has

summarized the research and developed a model of the feminine organization that has six characteristics as under:

Members are valued as individual human beings: People are treated as individuals with individual values and needs, rather than as occupants of role of offices.

Non-opportunistic: Relationships are seen possessing value in themselves, not just as formal means to the achievement of organizational goals.

Careers are defined in terms of service to others: Whereas organization members in a bureaucracy define career success in terms of promotions, acquisition of power, and pay increases, organization members in the feminine model measure success in terms of service to others.

Commitment to employee growth: Feminine organizations create extensive personal growth opportunities for their members. Rather than emphasizing specialization and the development of narrow expertise, these organizations expand member skills and broaden employee competencies by offering new learning experiences.

Creation of a caring community: Member becomes closely bound in a community sense, much as in small towns where people have learned to trust and care for their neighbours.

Power sharing: In the traditional bureaucracy .information and decision-making authority are coveted and hierarchically allocated. In the feminine organization information is generously shared. All members who will be affected by a decision are given the opportunity to participate in that decision.

According to Robbins (1996), the feminine model may be more effective and a model of choice in organizations that are essentially managed by and for women. This would include, but certainly

not be limited to rape crisis centers, battered women's shelters and entrepreneurial firms that sell products directed to the female market etc.

METHOD

Sample

The sample consisted of 50 female post graduate students in the final year of management studies. They were specially selected to participate in the study because they had joined the course with specific objective of pursuing a career as future manager and executive to India Inc.

Procedure

Each participant was given two printed sheets, one with the detailed explanation of six characteristics proposed by Rothschild's model and second sheet with various types of prejudices and stereotypes that they may encounter at their workplace. The interviewer dealt with each subject individually and discussed and explained the aim of the study in the light of the model as an affirmative action to effectively deal with these biases. The comments and opinions were noted down during the unstructured interview and the data analyzed by converting the responses to percentages.

RESULT AND DISCUSSION

An analysis of the data brought out the following conclusions:

Nearly all the participants felt that if their respective organizations could really incorporate the six characteristics of the model, their work life would be ideal (95%). But a very large percentage of participants felt that six characteristics of the model should be the aim of any organization, a feminine or mixed.

TABLE 1

Shows the percentages of responses of the 50 participants of the study.

S. No.	*Model as an affirmative action for gender biases*	*% of responses*
1.	An ideal organization with exciting work life	95
2.	All types of organizations should aspire for it	93
3.	If implemented will be able to deal with all work place biases	86
4.	Will be detrimental to women's long-term growth and development	80
5.	It will compartmentalize women and narrow their outlook	85
6.	Women have to grow and actualize among the men colleagues	87
7.	Women will not be able to make men understand their needs of upliftment and empowerment	88
8.	Will segregate women and breed mistrust in men	89
9.	Men will feel threatened and it will hamper a change in their attitude and mentality	75
10.	Glass ceiling will be broken once women are able to assimilate	76
11.	Women have to learn to deal with power and politics of the work place	90
12.	Will not face any sexual harassment	85
13.	Will be able to cope with sexual harassment if they conduct themselves with dignity	92
14.	Will take legal action against the offender	95
15.	Will not use sexual harassment clause to blame an innocent party	98

Eighty six percent of participants felt that implementation of the six characteristics will effectively deal with all the basis of the work place.

Many of the responses (Table 1, responses 4, 5, 6, 7, 8) felt that a feminine organization may be detrimental to women's long term growth and development and will compartmentalize and narrow their outlook. The general consensus was that women have to grow, actualize and find a place for herself amidst the other half of the work force - they are complementary to each other - together they can contribute more effectively for building a healthy, dynamic and productive organizational climate.

Feminine organization may further marginalize women, as the segregation may breed mistrust in men and make them feel threatened which will hamper a change in their attitudes and mentality. The surprising observation was regarding the question of sexual harassment. A small percentage felt that they may have to face it at the work place and hoped that they will be able to deal with it. Majority were of the view that if the women kept their dignity and dressed and deported themselves with decorum there was no question that they will face this problem.

So, the final conclusion was that feminine organization proposed all the ideal conditions for an effective and happy work place but was not a practical solution to deal with the work place prejudices and biases. Both the players in the field - men and women - have to respect each others talent and contribution and celebrating their differences they have to go together to fulfill themselves as career oriented individuals and productive members of their organization.

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Profile of Need Patterns among Women Across Life Span

Nov Rattan Sharma, Sonu Joshi and Sushma Sharma

Personality is the product of physical and non-physical attributes. Physical attributes are those, which are apparent to outside world. It consists of a person's built, height, complexion, facial features and way to carry oneself. Non-physical attributes of personality consist of attitudes, preferences, expression and manners. While in former cases the genetic set up plays important part, in latter case the environment and upbringment has crucial bearing.

As shadow position of a thing under the Sun keep on changing with advancement of day, in the same manner for an individual both physical as well as non physical attributes of personality keep on changing over the period. Between the two, the physical attributes are more fickle as compared to non-physical ones. The reason is factors affecting physical attributes of personality are plenty and in direct contact with outer world while on other hand non-physical attributes are relatively less, and take time and positive inclination to leave their impact on the individual.

In an individual, various hues of personality keep on becoming dominant and recessive over the period depending upon

change in priorities. This moulds his drive to act or not to act in a particular situation. Personality of a person affects and get affected even by personalities of other persons. The age, socio-economic condition and culture too affect it. Personality is such an important aspect that it covers whole gamut of a man's life. It decides, inter alia, one's priorities of need in life, his likings and dislikings and behaviour.

Psychologists have worked on personality and discovered a lot about it from their own personal and research experiences, thus formed a theory of its makeup and working principles, which informs about the nature of humans. Many of the personality theories were formulated by professional psychotherapists in order to heap them understand what went wrong in the development or functioning of personality and what should be ideal development and functioning for the people. Assessing personality requires knowledge of these theories of personality as it can aid in deciding the ideals for healthy personality and the good life. As personality has been studies in a number of different ways, therefore, some broad approaches about the make up of the personality have been propagated. The four categories of approaches are: Dynamic Approach, Humanistic Approach, Learning and Behavioural Approach, and Type and Trait Approach.

Dynamic approach focuses on interactions between hidden motives, needs and impulses to produce person's behaviour. On the other hand humanistic approach believes that personality should be studies with the human model. Whereas, learning and behavioural approach emphasizes that behaviour which makes a personality is conditioned or learned. At the same time Type and Trait approach viewed behaviour as a joint function of person's characteristics and situational features. Present investigation is based on the study of personality via those need patterns as suggested by Murray's psychology.

Murray's Motivational Psychology Theory

Murray (1938) coined the term 'personology' which means 'the scientific study of the total person'. He had introduced a large number of concepts to represent the factors that must be understood in describing, explaining, predicting and controlling personality phenomena. His concepts encompassed the personality, the environment and the history of the organism. He had a bewildering list of factors to represent a single personality.

He placed a great deal of stress on the 'needs' as the basic driving forces in personality. He stressed the role of needs as determinant of behaviour. The happenings in a person's life are brought about by the individual. The individual make things happen, and even the things that happen to the person are interpreted within a framework of his or her needs. Alter the need structure of a person, and one can alter his or her whole personality and its relation to the person's environment.

According to Murray, "a need is a construct which stands for a force in the brain region, a force which organizes perception, apperception, intellection, conation and action in such a way as to transform in a certain direction of existing unsatisfying situation. A need is sometimes provoked directly by internal processes of a certain kind but more frequently by occurrence of one of a few commonly effective environmental factors/forces. Thus, it manifests itself by leading the organism to search for or to avoid encountering or when encountered to attend and respond to certain kind of environmental force. Each need is characteristically accompanied by a particular feeling or emotion and tends to use certain modes to further its trend. It may be weak or intense, momentary or enduring. But usually it persists and gives rise to a certain course of overt behaviour (or fantasy) which changes the initiating circumstances in such a way as to bring about and end situation which stills the organism.

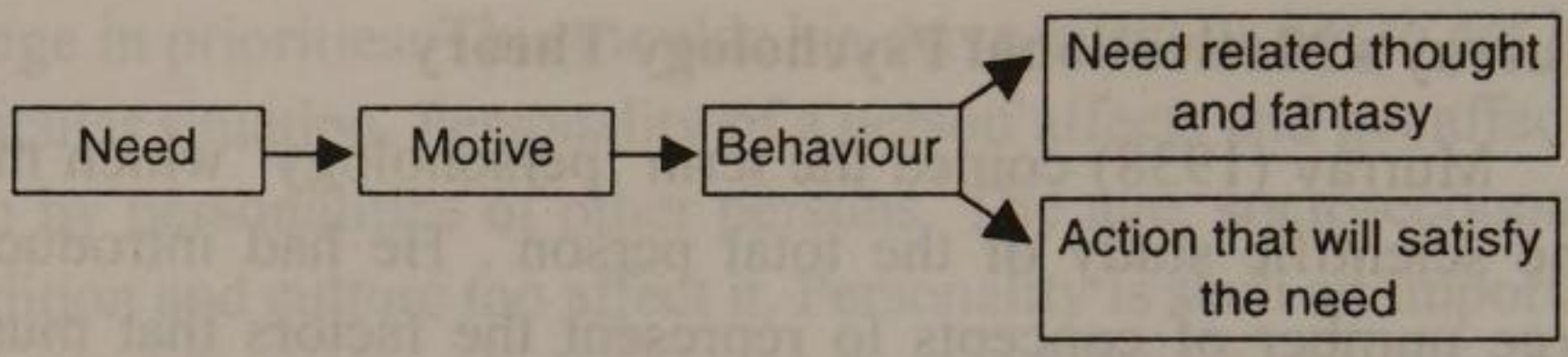

Figure 1: Showing how the need influences the behaviour.

The figure explains the relationship between the need and behaviour. Needs motivate people to think about different things and take different course of action. Thus, need supply motive, which lead to thought, and action.

Murray states that existence of a need can be inferred on the basis of:

1. The effect or end result of the behaviour.
2. Particular pattern or mode of behaviour involved.
3. Selective attention and response to a particular class of stimulus object.
4. Expansion of a particular emotion.
5. Expression of satisfaction when a particular effect is achieved or disappointment when the effect is not achieved.

Subjective report regarding feelings, intentions and goals provide additional criteria.

Murray classified needs into following categories:

1. *Viscerogenic and Psychogenic Needs:* The two major classes of needs are viscerogenic, which relates to bodily functioning and the psychogenic, which are qualities of the personalities. The two classes are interdependent. Culture has the greatest influence on the psychogenic needs. Viscerogenic needs have a definite zone of body that serves as the source of tension, the psychogenic needs are experience without any particular localization,

e.g. there is no bodily organ involved in feeling lonely. Viscerogenic needs are rhythmical and cyclical. The needs come and go periodically as a result of the requirement of the living organism. Psychogenic needs are more dependent upon press or circumstances and do not occur in a set cycle. They also come but the rhythm is not regular. Generally viscerogenic needs are more directly related to survival than are the psyschogenic needs, thus, they are more potent than psychogenic needs. Under certain conditions, however, a psychogenic needs may take priority over viscerogenic needs. Illustrative of viscerogenic needs are needs for air, water, food, sex, lactation, urination, and defecation. Examples of psychogenic needs are need for construction, achievement recognition, etc.

2. *Overt and Covert Needs (Manifest and Latent):* Here differences are made between those needs that are permitted more or less direct and immediate expression and those that are generally restrained, inhibited or repressed. Overt needs express themselves in motor behaviour while covert needs usually belong to the world of fantasy or dreams.

3. *Proactive and Reactive Needs:* Proactive needs is one that is largely determined from within, one that becomes 'spontaneously kinetic' as the result of something in the person rather than environment. Reactive needs are activated as a result of or in response to some environmental event.

4. *Process Activity, Modal Needs and Effect Needs:* Effect needs are needs that lead to some desired state or end result. Process activity and modal needs are tendencies to perform certain acts for the act of performance itself. The random, uncoordinated non-functional operation of

various process (vision, hearing, thought and speech) that occurs from birth onwards. Modal involved doing something with a certain degree of excellence or quality.

Inter-Relation of Needs

Needs do not operate in complete isolation from each other, and the nature of this interaction or mutual influence is of crucial theoretical importance. Murray accepts the fact that there exists a hierarchy of needs with certain tendencies taking precedence over others. The concept of 'pre-potency' is used, to refer to needs that become regnant with the greatest urgency if they are not satisfied. Thus, in a situation where two or more needs are aroused simultaneously and motivate incompatible responses, it is pre-potent need (pain, hunger and thirst) that ordinarily will be translated into action, as pre-potent needs cannot be postponed. A minimal satisfaction of such needs is necessary before other needs can operate.

Needs sometimes fuse with each other so they are reflected in the same act i.e. a single action satisfies two needs. Needs can also act in the service of one another - for example, a person may have a need for order which supports and works to the benefit of a more general need for achievement. Needs may conflict with one another as well, for instance the need for autonomy can conflict for the need for affiliation.

Just as the concept of 'need' represents the significant determinant of behaviour within the person, so the concept of 'press' represents the effective or significant determinant of beahviour in the environment. The term 'press' stands for the stimulus for a particular person. A press does something to or for a person. The notion of press is that the environment may force the person into certain postures or predicament. Just as needs tell us about the determining tendencies within the individual so press provide us with knowledge of the environment for a particular

person. Knowledge of needs would be insufficient without knowledge of the significant environmental factors.

From the above discussion, it is clear that there may be various methods to assess personality as delineated by various theorists. But different psychologist evolved different concepts for studying the personality of an individual. They stressed that in order to understand personality of an individual, these concepts must be studied carefully.

As stated earlier present investigation follows the approach adopted by Murray to study personality to whom needs are the patterns that describe people's personality. Therefore, study of need patterns becomes quite necessary to understand the behavioural patterns of the organism.

What are needs and what are their relative importance in human behaviour is clear from the above theories. Since the purpose of present investigation is to study needs across life span, it becomes imperative to throw some light upon the concept 'life span'. Life span refers to a number of periods in the life cycle. The life cycle can be divided into following periods, namely: prenatal, infancy, early childhood, middle and late childhood, adolescence, early adulthood, middle adulthood and late adulthood.

The prenatal period represents the time from conception to birth. It is time of tremendous growth. There are environmental hazards that can significantly alter the entire course of the life cycle. Infancy is usually recognized as extending from the birth to two years. It is time of extreme dependence upon adults and many physiological and psychological activities just beginning. Early childhood starts form the end of infancy to about five to six years. The tasks mastered in this stage are the ability to take care for oneself and development of school readiness skills. Middle and late childhood extends from about six to ten years. Fundamental skills such as reading, writing and arithmetic are

mastered. Thought processes usually are very concrete. Adolescence is the period that starts from approximately at 10-13 years to 19-20 years. It is a time for readying the developing mind and body for an independent, productive life in the adult world. The development of identity and abstract thought also characterize adolescence. More and more time is spent outside the family. Early adulthood usually begins from 20 years to 30 years. It is a time for establishing personal and economic independence. Career development becomes very important for some adults and for many adults, selecting mate, enjoying with others, starting a family take up a great deal of time. Middle adulthood characterized the phase of the life cycle form 35-45 years to 45-65 years. It is time of expanding personal and social involvement and responsibilities for adjusting to the physiological changes of middle age. Late adulthood lasts from approximately 60-70 years of age until death. It is a time for adjustment to decreasing strength and health. Establishing affiliations with members of one's age group and adapting to social roles.

From this review it becomes clear that besides varying physiological stages people of different age group have their own preferences and attitude to perceive the process of life and with passing of years their thinking and priorities keep on changing. Preferences, attitude, thinking are some of the crucial ingredients of need patterns. Needs keep on changing with advancement of age and there is definitely a difference in the need patterns of a young boy of 16 and an aged man of 70 years. One can better understand influence of age on the need pattern by taking an illustration. If different psychological needs are represented in bulbs then these bulbs switch on and off at different age levels. Not only this but the bulbs illuminate with varying intensity at the same time pointing that while some stages of life span some psychological needs may be dominant and others recessive, in some other stages of life vice versa happens. Further, it can be said that in a particular age group some psychological needs will

generally be present. However, the intensity of one of these over the other will differ from individual to individual. While it may be very common to find a high level of exhibition need in young age whereas it is equally normal to find a high need for deference and nurturance in advanced age.

However, there may be other factors than aging which influences the need patterns and in turn the personality, but researches have shown strong associations between age levels and need patterns.

In the direction of impact of physical impairment on needs of a person Bhardwaj (1999) assessed psychological needs of normal, congenitally blind and cerebral palsied children by administering Tripathi Personal Preference Schedule on 120 subjects between 8-14 years with 40 each from each category. Results revealed that groups did not differ in need for deference, autonomy, affiliation, abasement, nurturance, endurance and aggression. Normal children had greater need for exhibition and heterosexuality compared to other groups. Congenitally blind children had greater need for achievement and Intraception. Cerebral palsied children had greater need for change and achievement than normal.

Impact of ageing on needs was investigated by Hess (2001) who examined the construct "Need for Structure" in relation to adult age using the Personal Need for Structure Scale (PNS). The result of a series of confirmatory factor analysis indicated that the two intercorrelated factor structure of PNS Scale held up well cross individuals aged between 21-85 years, validating its use for the examination of ageing effects. Structural equation modeling analysis found that ageing was associated with lower level of physical health and cognitive skills, which in turn were related to higher PNS scores. It was also found that impact of reductions in these resources on need for structure were counteracted by high levels of social activity and emotional health. The argument made

in this context is that ageing related changes in personal resources produce impact on everyday behavior, through changes in motivation, such as need for structure.

Whether there is any difference in self perceived needs of student at various grade. To understand this relationship, the level of self perceived needs required to be studied in different grades. In this direction, Couture (2002) surveyed 651 adolescents (aged 9-18 years) in grades 7, 8, 9, 10, 11, 12 to explore differences in their self perceived needs. Students in junior high grades reported higher needs in area of setting clear and consistent expectations, academic skills, sexuality, physical well being and self esteem, while students of senior grades highlighted future oriented needs concerning careers, self management. Grade 7 students placed more emphasis on interpersonal relationships and home life. No differences were found between the senior high grades. Gender differences were also found across grades. The results highlighted the importance of considering developmental differences particularly when planning and designing the programs to address the needs of adolescent students.

Since people of different age group might exhibit different needs and study of needs play an important role in deciding behavioural patterns, therefore, it was thought appropriate to study psychological needs in different stages of life. Needs even play a very important role in motivational behaviour, personality development and mechanism of coping behaviour at almost all stages of life. However, so far studies have been conducted mainly by taking only few needs of very specific age groups. An attempt in this study has been made to study the total need patterns of the women across life span.

METHOD

Following design and methodology was adopted to carry out the present investigation:

Sample

A sample of 150 female subjects belonging to five different age groups (10-14 years, 15-19 years, 20-39 years, 40-59 years and 60 years and above) and each age group consisting of 30 female subjects was selected from the general population of Rohtak city on the basis of availability. All the selected subjects were literate and able to understand (read and write) Hindi Language. It was also ensured that all the participants belonged to middle socio economic status group.

Design

This investigation was planned mainly to study the need patterns of female subjects in relation to age. For this purpose following multigroup design was adopted:

Early adolescence 10-14 years	*Late adolescence 15-19 years*	*Early adulthood 20-39 years*	*Middle adulthood 40-59 years*	*Late adulthood Above 60 years*
Group I n=30	Group II n=30	Group III n=30	Group IV n=30	Group V n=30

Tools

Following tests and tools were used in the present investigation for data collection:

Personal Data Blank Sheet: The purpose of this personal data blank sheet was to collect personal information of the respondents. This sheet consists of information regarding the subject's name, age, sex, educational qualifications, employment status, martial status, etc.

Tripathi Personal Preferenice Schedule (TPPS): To assess the need patterns of the subjects, Tripathi Personal Preference Schedule, developed by Tripathi (1973) was used. It is an Indian adaptation of Edward's Personal Preference Schedule (EPPS)

developed in 1954 by Edward. There are 225 pairs of statements in the test and the variables that these statements purport to measure have their origin in a list of manifest needs presented by Murray (1938). Thus, TPPS provides measure of fifteen personality variables in the form of fifteen needs. As stated earlier, needs as understood by Murray are the basic driving forces in personality and they are the crucial determinant of behaviour.

The manifest needs associated with each of the fifteen TPPS variables are as follows:

i) Achievement (ach)—To accomplish something of great significance, to do one's best, to be successful, to do a difficult job, be recognized authority.

ii) Deference (def)—To get suggestions from others, to follow instruction and do what is expected, to accept leadership of others, to conform to custom and avoid the unconventional, to let others make decisions.

iii) Order (ord)—To have things organized, to make plans before starting on a difficult task, to keep things neat and orderly, to have things arranged so that they run smoothly without change.

iv) Exhibition (exh)—To talk about personal adventures and experience, to say witty and clever things, to be centre of attention, to talk about personal adventures.

v) Autonomy (aut)—To be independent of others in making decision, to feel free to do what one wants, to do things without regard to what others may think, to avoid obligations.

vi) Affiliation (aff)—To form strong attachments, to be loyal to friends, to participate in friendly groups, to share things with friends.

vii) Intraception (int)—To analyze one's motives and feelings, to understand how others feel about problems, to observe others, to analyse the behaviour of others.

viii) Succorance (suc)—To have others provide help when in trouble, to have others by sympathetic and understanding about personal problems, to have others be kindly, to be helped by others when depressed.

ix) Dominance (dom)—To make group decisions, to persuade and influence others to do what one wants, to be a leader in group, to argue for one's point of view.

x) Abasement (aba)—To feel guilty when one does something wrong, to accept blame when things do not go right, to feel the need for punishment for wrong doing, to feel inferior to others in most respect.

xi) Nurturance (nur)—To assist others less fortunate, to treat others with kindness and sympathy, to forgive others, to be generous with others, to show a great deal of affection.

xii) Change (chg)—To do new and different things, to experience novelty and change in daily routine, to experiment and try new things, to participate in new fads and fashion.

xiii) Endurance (end)—To complete any job undertaken, to keep at a job until it is finished, to avoid being interrupted while at work.

xiv) Heterosexuality (het)—To go out with members of opposite sex, to engage in social activities with the opposite sex, to participate in discussion about sex, to read books and plays involving sex.

xv) Aggression (agg)—To attack contrary points of view, to criticize others publicly, to become angry, violent.

The test has been reported to possess high reliability and validity. The two most common aspects of reliability of a scale are internal consistency and stability. Coefficient for internal consistency on all the fifteen needs ranges from .82 to .99 and the coefficient for stability ranges for .65 to .76. The values are

exceedingly high and are thus presents satisfactory indices of reliability. Regarding discriminant validity, coefficient of correlation between the scores on Tripathi Personal Preference Schedule and Thematic Apperception Test ranges from .65 to .93, which is again satisfactory indices of validity.

The test contains 225 pairs of statements. Each statement has two situations, eliciting information about feelings and sentiments. The subject is required to select one on the basis of his preference and mark his / her preference in answer sheet as per given instructions. However, there is no time limit for completion of the test but respondents are directed to complete the job as soon as possible. In this test, there is a provision to deal with omitted items. If such omissions are small, approximate scores are obtained for such items by tossing of coin. For scoring purpose, there is a scoring template and a manual. With the help of the template, consistency scores of the respondents are obtained to test whether the subjects are responding the items sincerely or are taking chances. A consistency score, in order to be significant, must be greater than 8, hence respondents record with consistency scores of 9 or more alone are taken for normative interpretations. With the help of the manual raw scores for the entire need variables are obtained. Norms are provided to convert these raw scores into percentile or T-score.

Procedure

The present investigation was conducted to study the need patterns in relation to age of the respondents. To fulfill this purpose, Personal Data Blank Sheet, and Tripathi Personal Preference Schedule (TPPS) were administered to all the 150 female subjects of various age groups (from early adolescence to late adulthood).

There were two tests to elicit the information on these tests; the investigator applied them to the subjects individually by

approaching them at their respective place of working / reading / living etc.

At first, the investigator approached a subject of Group I at her residence and established a good rapport for creating a congenial environment to extract authentic information from her. After obtaining consent of the subject to act as respondent, firstly, Personal Data Blank Sheet with following instructions were given: "You will be given a questionnaire in which there are personal questions regarding your name, age, sex, educational qualifications, employment status, marital status etc. Please read the questions carefully before filling the information." When the subject completed the sheet it was taken back from her. Secondly, the investigator administered Tripathi Personal Preference Schedule (TPPS) and following instructions were given to the subject, "This test would gauge your personal preferences. This test contains one booklet and one answer sheet. The booklet contains 225 statements in the form of pairs, which are about a certain situation. You have to make a choice between the two statements of a pair even though both the statement may be equally liked or equally disliked by you. You have to record your responses on answer sheet by circling the chosen option / answer on the basis of your preference. Be sure that no item from the booklet is omitted. There is no time limit but you have to work rapidly. "After giving the above instructions and making it sure that the subject has clearly understood them, TPPS was given. The investigator sat besides the subject and cleared all the doubts raised by the respondent while filling / recording his answers on response sheet. The subject took about 40 to 45 minutes to complete this test.

The investigator examined that all the two tests have been filled fully and the subject has left out no question. The subject was given bundle of thanks for cooperation and sincerity. After this, the investigator approached the next subject. Data of all the

remaining subjects were collected in a mix order in terms of administration of tests as well as selection of subject. However, in every case, data was collected in an individual setting.

After collecting the data, the responses of subjects were scored, in case of TPPS consistency score were obtained with help of template. For the purpose of present study, responses of only those subjects were considered whose consistency score stood at 9 or above and the rest ones were rejected. (Answer sheets filled in non seriously were also rejected). Afterwards, scoring was done as per the instructions given in the manual. Obtained data was put for statistical analysis for further discussions.

RESULTS AND DISCUSSION

The objective of the present study was to examine and compare the need patterns of female subjects across life span. For this purpose a sample of 150 subjects belonging to five different age groups (early adolescence, late adolescence, early adulthood, middle adulthood, and late adulthood) was selected from general population on the basis of availability. Tripathi personal preference schedule and a personal data blank sheet were administered to the subjects individually by approaching them at their respective places. Descriptive statistics, one way analysis of variance and post hoc-group comparison test were applied to the data for the study of need patterns, checking the significance of group mean differences and drawing logical conclusions.

The results form the above table indicates that as compared to other stages of life need for achievement is the highest during and middle adulthood. It shows that people at this stage of life want to be successful and accomplish something of significance and strive to become a recognized authority than people belonging to other age groups. Needs for achievement is the lowest during late adulthood. It indicates that people in their late adulthood do not give much importance to success.

TABLE 1

Showing mean values of different age groups on various needs

Needs	*Early adolescence (10-14 yrs)*	*Late adolescence (15-19 yrs)*	*Early adulthood (20-39 yrs)*	*Middle adulthood (40-59 yrs)*	*Late adulthood (Above 60 yrs)*
Achievement	13.43	11.6	13.67	13.7	10.33
Deference	13.57	11.3	14.6	15.17	13.63
Order	15.03	16.2	15.03	16.73	15.7
Exhibition	11.6	13.1	13.63	10.93	11.3
Autonomy	14.4	11.8	12.43	14.33	12.37
Affiliation	16.27	16.47	15.03	15.57	15.47
Intraception	15.17	15.17	14.93	15.4	14.0
Succorance	13.67	16.4	15.6	14.93	16.53
Dominance	13.17	12.17	13.57	12.57	12.33
Abasement	15.97	17.33	14.03	14.17	18.93
Nurturance	15.4	18.0	16.0	16.17	19.23
Change	15.5	15.33	13.57	12.4	10.87
Endurance	15.4	15.5	15.23	15.5	18.77
Heterosexuality	9.9	8.67	11.2	10.4	9.43
Aggression	11.5	10.93	11.47	12.03	11.07

The table points that as compared to other stages of life, need for deference is the highest preferred during middle adulthood which means people of this age group are more likely to follow instructions and prefer to do what is expected form them. Need for deference is the least preferred in late adolescence. It shows that people at this stage are less likely to follow instruction or do what is expected from them.

The above table also indicates that need for order is the highest during middle adulthood and the lowest during early adulthood and early adolescence. Meaning thereby, that people of age group (40-59 years) are more likely to have things well organized, to keep things neat and orderly and to have things arranged so that they run smoothly without change as compared to people of other age groups.

Table one hints that as compared to other stages of life, need for exhibition is the highest during early adulthood meaning thereby that people of this age group are more likely to talk about personal experiences and try to be centre of attention. However, it is the lowest in middle adulthood which means that people in middle adulthood prefer not to talk about their personal experiences and avoid to be centre of attention.

The mean table indicates that need for autonomy is the highest during early adolescence and the lowest in late adolescence. It suggests that people of this age group are more likely to be independent in decision making and feel free to do whatever they wants to do as compared to the people of late adolescence.

The above table shows that as compared to other stages of life, need for affiliation is the highest during late adolescence. This simply implies that people of this age group are more likely to participate in friendly groups, form strong relationships and share things with friends than people belonging to other age groups. However, it is the lowest in early adulthood indicating that people of early adulthood prefer not to share things with friends and are less likely to form strong relationship.

It is evident form the results that as compared to other stages of life, need for intraception is the highest during middle adulthood. This observation means that people of this age group are more likely to observe others, to understand what others feel about problems and to predict how others will act than people belonging to other age groups. However, it is the lowest during the late adulthood which means that in late adulthood women are less likely to observe others and understand what others feel about the problem.

The above mean scores expresses that as compared to other stages of life, need for succorance is the highest during late adulthood. It implies that people of this age group are more likely to be helped by others when depressed and to have others be

kindly to them than people belonging to other age groups. This need is the lowest in early adolescence. It shows that at this stage people prefer not to be helped by others when depressed.

The above results clearly indicates that as compared to other stages of life, need for dominance is the highest during early adulthood thereby it can be said that people of this age group are more likely to argue their point of view, regard as leader by others and make group decision than people belonging to other age groups. It is the lowest during late adolescence which means that in late adolescence period girls are less likely to argue their view point and make group decisions.

The above table points out that need for abasement is the highest during late adulthood. Meaning thereby that people of this age group are more likely to feel guilty when does some thing wrong, accept blame when things do not go right and feel better when giving in and avoiding a fight than people belonging to other age groups. It is the lowest in early adulthood which shows that people at this age do not feel guilty on doing something wrong nor they accept blame.

The above mean values points out that need for nurturance is the highest during late adulthood and the lowest during early adolescence. Thereby, it can be said that people of late adulthood group are more likely to help friends when they are in trouble, do small favours for others and are generous with others as compared to people belonging to early adolescence.

From the above table it is clearly evident that as compared to other stages of life, need for change is the highest during early adolescence meaning thereby that people of this age group are more likely to do new and different things, participate in new fads and fashion and try new and different jobs than people belonging to other age groups. It is the lowest during late adulthood. It shows that people of this age group do not try different things and do not participate in new fads and fashion.

The above table clearly points that need for endurance is the highest during late adulthood whereas the lowest in early adulthood. This means that people in their late adulthood are more likely to complete any job undertaken and avoid being interrupted while at work than people belonging to early adulthood.

It is clearly evident form the above table that need for heterosexuality is the highest during early adulthood meaning thereby that people of this age group are more likely to engage in social activities with the opposite sex, to make friends with opposite sex, to participate in discussion about sex and read books and plays involving sex whereas it is the lowest in late adolescence which means that girls of this age group prefer not to read books involving sex and generally avoid participating in discussion about sex.

The above table clearly points that as compared to other stages of life, need for aggression is the highest during middle adulthood meaning thereby that people of this age group are more likely to attack contrary points of view, criticize others publicly and make fun of others than people belonging to other age groups. It is the lowest in late adolescence which shows that girls of this group prefer not criticize others and make fun of others.

Discussion based on the mean values of various needs belonging to different age groups very clearly indicates that age is an important factor to determine need patterns. In order to check the effect of age level on need patterns statistically, one way analysis of variance (ANOVA) was applied. However, post hoc analysis was also undertaken to check the significance of mean differences between / amongst different age groups on various needs. It is important to note that out of fifteen needs, there are only five need patterns namely order, affiliation, intraception, dominance and aggression where obtain F-values are found to be non-significant. Thus, remaining ten F-values are

significant indicating that these need patterns significantly vary across the life span among women.

Post-hoc analysis based on Tukey HSD test in case of significant F-values helped the investigators to understand the significance of mean differences between all possible group pairs at five age levels. Only significant mean pairs have been presented in Table 2. In case of achievement need, it is observed that late adulthood age group (Group V) possesses significantly lower strive in comparison to the subjects of all other age groups except late adolescence. Similarly, in case of need for deference late adolescence group (Group II) shows significantly lower level of likelihood to follow instructions as compared to early and middle adulthood. However, in case of need for exhibition early adulthood subjects i.e. of 20-39 years expresses significantly high level of personal attention in comparison to other age groups except Group II. As far as need for autonomy is concerned, it is significantly lower in late adolescence girls then their counterparts of early adolescence and early adulthood.

Mean comparisons for need of succorance indicates that girls belonging to early adolescence group have significantly lower level in comparison to the subjects of group II and group V. In case of need for abasement, Group V exhibits significantly high mean value than means of group I, III and IV. Whereas, mean differences between Group II and III as well as between Group II and IV are also significant resulting higher need for abasement in Group II. Similarly when mean values on need for nurturance are compared by applying post hoc analysis, it has been observed that subjects of late adulthood group are significantly more likely to help friends when they are in trouble in comparison to the subjects of Group I, III and IV. At the same time, it also indicates that this need is significantly higher in late adolescent girls in comparison to early ones. While observing mean comparison on

TABLE 2

Application of one way ANOVA to the scores of different age groups on various needs along with a post hoc analysis (Tukey HSD) for mean comparison (Only significant mean comparisons have been presented).

Needs	*F value*	*Post-hoc Analysis*				
		Group I	*Group II*	*Group III*	*Group IV*	*Group V*
		Early adolescence (10-14 yrs)	*Late adolescence (15-19 yrs)*	*Early adulthood (20-39 yrs)*	*Middle adulthood (40-59 yrs)*	*Late adulthood (Above 60 yrs)*
Achievement	7.01**	G-V	-	G-V	G-V	-
Deference	5.63**	-	G-III, G-IV	-	-	-
Order	1.34 (NS)	-	-	-	-	-
Exhibition	5.43**	G-III	G-IV	G-IV, G-V	-	-
Autonomy	4.59**	G-II	G-IV	-	-	-
Affiliation	0.47 (NS)	-	-	-	-	-
Intraception	0.53 (NS)	-	-	-	-	-
Succorance	3.60**	G-II, G-V	-	-	-	-
Dominance	1.03 (NS)	-	-	-	-	-
Abasement	12.36**	G-V	G-III, G-IV	G-V	G-V	-
Nurturance	7.30**	G-II, G-V	-	G-V	G-V	-
Change	9.63**	G-IV, G-V	G-IV, G-V	G-V	-	-
Endurance	4.92**	G-V	G-V	G-V	G-V	-
Heterosexuality	2.49*	-	G-III	-	-	-
Aggression	0.483 (NS)	-	-	-	-	-

NS- Non-significant, * $p<0.05$, ** $p<0.01$

need for change it is seen that late adulthood people have significantly lower need to do new and different things than the people belonging to Group I, II, III. Middle adulthood subjects also exhibited significantly lower scores on this need than Group I and II. In case of need for endurance, it is observed that only late adulthood people have significantly different (higher) mean value from rest of the four groups. It implies that female belonging to the age group of above 60 years are more likely to complete any given job in comparison to the females of any other age. Lastly, need for heterosexuality is significantly different and higher in the period of early adulthood in comparison to the group of late adolescence period. It implies that females of 20-39 years are more likely to engage in social activities, make friends, discuss about sexual topics with the opposite sex.

From the above presentation, where only significant mean difference have been described, it is quite clear that age has to play a strong contributory role in deciding the level of different psychological needs. In turn, it can also be mentioned that need based personality make up of an individual is likely to change either side as he/she steps towards aging.

Couture (2002) in a survey observed the developmental differences in regard to the needs preferences. Similarly, in an earlier study Sharma (1991) examined the effect of age on the four need motivations where he observed the significant main effect of age on need for approval and power. Although, along with age, gender is also a significant determinants of need patterns (Sharma, Joshi and Yadava 2004).

In sum, present study has an important implication in the form to understand the people through their need profile as need patterns successfully reflect the personality make of an individual. This study will also have its relevance in the developmental psychology.

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27

Awareness among Women Contestents: A Municipal Election 2005

S.C. Arora and R.K. Prabhakar

After independence India has adopted West Minister model of parliamentary democracy. One of the salient features of the Indian Constitution is that it makes no discrimination on the basis of caste, color, creed, gender etc. Thus, theoretically, Indian citizens, both men and women have been provided equal political rights and opportunities. However, in actual practice, women's participation in political process particularly in terms of their representation in legislative bodies at all levels presents a dismal picture. This is quite evident that despite the fact that about 48 per cent of India's population consists of women and about 70 per cent of them are voters, their representation in legislative bodies, since independence, has been negligible. The percentage of women MPs has never touched double figure mark in the *Lok Sabha*. It may be added that the women's representation in the present *Lok Sabha* is merely 8.13 per cent. In case of state legislatures, the situation is all the more discouraging as is clear from the fact that the average women's representation in them is just 4 per cent. The position is rather gloomy when one talks about their representation in the local self-governing bodies prior to the passage of the 73rd and 74th Constitutional Amendments Acts in the early 1990s.

One of the main reasons for women's poor representation in legislative bodies is their lack of interest in political matters which in turn may be attributed to the lack of awareness among them in this regard. So to generate women's interest and awareness in political affairs, it was rightly thought by political masters to empower them initially at the grass roots level. This thinking ultimately led to the passage of historic 73rd and 74th Constitutional Amendment Acts dealing with *Panchayati Raj* Institutions and Municipalities respectively. One of the laudable provisions of these Acts was one - third reservations for women in local bodies. It is pertinent to point out that local self-government being a State subject, the state governments were required to suitably amend their respective *Panchayati Raj* and Municipal Acts in the true spirit of these Amendments. Accordingly, Haryana (of which Rohtak is one of the important cities of the State) Government amended its Municipal Act, 1973 and the same became operational from 1994. Since then more than a decade has passed and meanwhile there have been three rounds of elections to municipal bodies in the State. One can expect that with this much or reservations and time span, women, especially the contestants, must have become quite aware and active with regard to political system in general and election process in particular. The objective of the present study is to assess the level of awareness among the woman contestants with regard to election process during the third round of elections to Municipal bodies held in April, 2005. The necessary data for the study have been collected through interviews with the help of interview guide at the time when electioneering was at its peak. It is supplemented by observations of the Research Team.

Rohtak Municipal Council was one of the 80 municipal bodies whose elections took place for the third time under the Haryana Municipal (Amended) Act on April 16, 2005. It would not be out of place to mention here that none of the political parties barring *Bhartiya Janata Party* contested election on party lines, though some political parties like Congress-I and *Indian National Lok Dal* (INLD) extended external support to their

respective candidates. There were in all 31 wards in this Council out of which 11 were exclusively reserved for women, including 2 belonging to Scheduled Caste women. There were in all 52 woman contestants in the fray including one eunuch. It is interesting to point out that all except 2 of the woman contestants (one each contested election from the Open ward category) belonged to 11 wards reserved for them. Further, of the 52 contestants, 2 did not pursue the electioneering after filing their nominations. Hence, for all practical purposes they remained out of the election process and so were not included in the universe of the study.

The data reveal an important fact that of the 50 woman contestants constituting the universe of the study, 42 contested election for the first time. It may be added that there were 13 such contestants whose male members of the family have contested the Municipal Council (known as Municipal Committee before the Amendment) elections at one time or the other. Further, about two-third (31) of the contestants belonged to such families as were having political affiliation with one or the other political party. Again in the case of majority of candidates (30) the vital decision of contesting the election was not taken by the woman contestants themselves but by others such as male family members or relatives, and *Biradari Panchayat.**

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* The term *'Biradari'* has been used here as a sub-caste-cum professional group/community such as artisans, *khatis* (carpenters), *lohars* (blacksmiths), *julahas* (weavers), *mochis* (cobblers), *dhobis* (washer man), *gawalas* (milkmen), etc. The people constituting these groups, in fact, belong to socially and economically backward strata of the society. Besides, they belong to variety of sub-castes like *Sainis*, *Dhanaks, Kurmis, Gujjars, Meos* etc. These groups play a very significant role in the elections particularly at the local level in various ways such as getting their groups enrolled as voters, selection of candidates, campaigning, collection of funds, making of holy and unholy alliances with other such groups as also with political parties to safeguard and promote their narrow and sectarian interests.

Awareness Regarding Candidature and Election Symbol

In order to ascertain the extent of involvement of woman contestants in the election process, it was pertinent to know whether they had knowledge about the bare facts relating to their candidature and election symbols. Accordingly, the candidates were asked at the very outset whether they were nominees of any political party or contesting the election as independents. All the contestants replied correctly with an exception of one party nominee. Likewise, to a query if they were being supported by any political party, the candidates replied correctly except one which expressed her ignorance in this regard. Again when the candidates were asked about their election symbols, all of them gave correct answer. Evidently, the candidates have exhibited a high degree of awareness with regard to the basic facts pertaining to the candidature and election symbols. However, it should not be taken as something remarkable as knowledge about these facts is expected from each and every candidate contesting the election, more so at the local level.

Awareness about Opponents

A significant question was put to the candidates about the names, party affiliation and election symbol of their opponents in the ward in order to assess their level of awareness in this regard. The responses received were varied due to high variation of numerical strength of the candidates (2 to 9) contesting the election from various wards. Besides, too much of diversity in correct responses given by candidates about the number of opponents from the same ward further complicated the matter. Resultantly, the whole data got jumbled which could hardly be tabulated in an ordinary way. To overcome this difficulty, the Research Team relied upon a formula given below:

$$\frac{\text{Total number of values obtained}}{\text{Total number of values}} \times 100$$

Here

(*i*) Total number of values obtained = sum of the correct answers received from the contestants about their opponents.

(*ii*) Total number of values = total number of contestants in the ward x total number of opponents in the ward

The responses received and tabulated with the help of the above formula are presented in Table I

TABLE I

Ward-wise Awareness of Contestants about Opponents' Name, Party Affiliation and Election Symbols

Sr. no.	*Ward no.*	*Contes-tants no.*	*Oppo-nents no.*	*Total values 3x4*	*Values Obtained*		
					Name	*Party affiliation*	*Election symbol*
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1.	1 (Open)	1	6	6	6	5	6
2.	2	5	4	20	20	12	20
3.	4 (Open)	1	8	8	8	7	8
4.	5	7	6	42	27	24	22
5.	7	3	2	6	6	4	5
6.	8	3	2	6	6	5	6
7.	11	8	7	56	48	31	37
8.	13	4	3	12	9	9	9
9.	14	3	2	6	6	5	6
10.	18	5	4	20	12	11	12
11.	26	4	3	12	12	9	9
12.	29	2	1	2	2	2	2
13.	30	4	3	12	9	4	9
Total	13	50	51	210	170 (80.95%)	128 (60.95%)	151 (71,90%)

The analysis of the data reveals that the awareness of the contestants with regard to their opponents' names, party affiliation and election symbol is 80.95, 60.95 and 71.90 per cent respectively. Comparatively speaking, the knowledge of the contestants is higher so far as the names of their opponents are concerned than in respect of their party affiliation and election symbols. On the face of it, the level of awareness in all the three aspects appears to be quite satisfactory and if seen from the point of view of the state and national levels, it can still be termed as remarkable especially in the Indian set-up. However, keeping in view the municipal elections where the size of the constituency/ ward is much too small with limited number of contestants and voters making it easy for intense electioneering, urbanite contestants and their social relationships in their wards and where complete or near complete knowledge is expected from contestants this level of awareness cannot be termed as laudable. The main reason responsible for this state of affairs is that most of women contested the election for the first time and that too under the persuasion and even compulsion by their men folk who managed their entire election and electioneering. In fact, most of the women as per the observation of the Research Team, were simply puppet contestants having little initiative in carving out a self dependent public image of their own. Other reasons responsible for this could be non-serious approach regarding electioneering on their part and inadequate public exposure due to heavy domestic responsibilities and engagements.

Awareness about Wards and Voters

In order to find out the extent of seriousness and effective involvement and effective participation of the contestants in the election process, the Research Team tried to probe their level of awareness with regard to their respective ward and number of voters. Keeping this in mind, a few questions, such as total number of wards in Rohtak Municipal Council, ward number of the

candidate concerned and the number of voters in her ward were put to them. In response to the question regarding total number of wards in the Municipal Council, out of the total 50 contestants as many as 33 (66.0%) gave correct answer, while 11 (22.0%) expressed their ignorance and the remaining 6(12.0%) were incorrect in their reply. Further, in reply to the query pertaining to the ward number to which the candidate belonged, all except one provided the correct answer. Again answering to a question about the total number of voters in their respective wards barely 7(14.0%) were able to give absolutely correct figure, whereas 20(40.0%) provided nearly correct answers. Of the remaining 22 contestants, 9(18.0%) provided incorrect answer while 14(28.0%) expressed their ignorance about it.

The above data reveal that one-third of the contestants failed to answer correctly regarding the total number of wards in the Rohtak Municipal Council. Further, nearly half of the contestants could not record the correct figures regarding the total number of voters of their respective wards. One wonders that how could such a large number of contestants afford to be ignorant and casual about these vital facts in a participatory democracy at the grassroots level. This clearly explains the political apathy on the part of such contestants which can be manly attributed to the reasons already stated such as large number of candidates being debutantes, dummy nature of their candidature, lack of public exposure etc.

Awareness about Election Date and Number of Polling Booths

Another important aspects of the election process about which the contestants are expected to have adequate knowledge are the date of polling and the number of polling booths in their respective wards. To the question about the date of polling all except 2 answered correctly. Unlike this as many as 22 contestants either expressed their ignorance or answered incorrectly when asked

about the number of polling booths in their respective wards. This shows that the level of awareness in the context of the latter leaves much to be desired.

Awareness about Limit of Expenditure

It may be appropriate to mention that there is an upper limit of expenditure of Rs. 50.000 prescribed by the State Election Commission for meeting election expenses by a candidate. The Research Team tried to explore from the respondents to find out if they were aware about this vital fact and those giving affirmative answers were further asked to mention the exact amount. In response to this question large majority of contestants, i.e. 42(84.0%) replied in affirmative. Out of these as many as 19(38.0%) gave correct answers while 17(34.0%) were found to be incorrect in their reply and the remaining 14(28.0%) expressed their ignorance about the exact amount. This shows that nearly two-third of the contestants were unaware about this important aspect of the election process.

The major reason attributed to this state of affairs is that under the election rules it has been made obligatory for the contestants to maintain proper accounts of election expenditure and to submit the same as and when asked by the authorities. Further, in order to effect the strict observance of these rules an Observer (Expenditure) was appointed by the State Election Commissioner. This made the woman contestants quite apprehensive in dealing with technical matter of accounts independently and therefore had to handover this responsibility to the male members of the family managing their elections. After transferring this responsibility, they almost felt unconcerned about this vital aspect of election process. It may be added that generally women in the Indian set up don't have an independent status and source of income. It was substantiated by the observations of the Research Team during the course of study that many candidates were entirely dependent upon their men

folk regarding their financial aspect of the elections. All these factors contributed to the isolation of contestants form this significant part of the election process that ultimately proved responsible for their poor level of awareness. It would not be out of place that other factors as already discussed do play a negative role in keeping their level of awareness low.

Awareness Regarding Reservation of Seats

As already stated the provision of one-third reservation of seats for women in the urban local bodies was introduced under the 74th Amendment Act, 1992 and the same was incorporated by the Haryana Government in its Municipal Act. 1973 as amended in 1994. Obviously, it was but natural for the Research Team to probe the respondents with a view to get information on this point so as to judge their level of awareness in this regard. So questions concerning : (a) under which Amendment reservations of seats provided; (b) percentage of seats reserved; and (c) the total number of seats reserved for women in the Rohtak Municipal Council were put to the contestants.

To the question (a) the Research Team drew a blank from all the contestants with a single exception. While responding to question (b) the majority of contestants 35(70.0%) expressed lack of knowledge, 4(8.0%) answered incorrectly and the remaining 11(22.0%) were correct in their answers. The position was slightly better with regard to question (c) as 17(34.0%) contestants replied correctly against 9(18.0%) who were wrong in their answers while the remaining 26(52.0%) had absolutely no knowledge about it. The above figures reveal a very shocking fact that none except one of the respondents had the knowledge about the reservations under 74th Amendment Act which was to benefit them a lot. This could mainly be attributed to the fact that there was no persistent and consistent demand on the part of women themselves or pressure from their organizations in this regard. Another reason was that the government and the media hardly made it an issue of

national debate before introducing and passing the Amendment. It so seems that the then ruling party extended this benefit to women folk in the name of empowerment but, in fact, with an eye at the 'vote bank.' The opposition parties too supported the move lest they may not be misunderstood on this issue. Besides, the level of general awareness of the Indian women regarding political matters being quite low, proved to be contributory factor for this disappointing response.

As regards the poor response to the question (b) and (c) is concerned, it can be attributed to the fact that the Amendment was not given due publicity before making it operative. Other reasons may be the lack of exposure of women to the media due to social taboos which restrict women to the four wall of the house, lack of their interesting public affairs and low level of literacy.

Findings of the Study

The study reveals that an over-whelming majority of the contestants was of new-comers. Most of them were reluctant to contest election but were persuaded either by the male members of their family or *Biradari Panchayat*. The reason behind persuading their woman-folk to come forward to contest elections was that they hardly reconcile in losing the political leadership as they stood debarred due to reservation.

Further, the study points out that the contestants were quite aware about basic facts regarding their candidature and election symbol. But when their knowledge about opponents' name, party affiliation and election symbol was put to test, the awareness level was not up to the mark keeping in view the nature of grass root participatory democracy having small size of the constituencies with limited number of voters. Almost same was the case with regard to their knowledge about total number of wards in the Council and the total number of voters in their respective wards.

Again, the respondents exhibited a poor level of awareness so far as knowledge about the limit of expenditure for election was concerned. The position was no better with regard to the awareness about number of boots in their respective wards, percentage of seats reserved for women under the 74th Amendment and the total number of seats reserved for women in the Rohtak Municipal Council. Still dismal were the revelations regarding the knowledge about the 74th Amendment providing reservations to them which nose dived to almost zero-level.

The overall level of awareness as the study shows is far from satisfactory and the reasons responsible for this phenomenon are not far to seek. In the first place, as already stated most of the woman contestants were made to contest elections by the male members of their respective families who in some case got debarred because of the reservation provisions but wished to keep with them the political leadership and influence over the residents of the area. Given the socio-economic set-up in which these women are placed, the contestants having very little political urge and ambitions and lack of interest and participation in public affairs allowed themselves to be convenient puppet candidates in the hands of their male family members. Since the entire election management, in fact, was handled by the men-folk, their election virtually turned into a proxy. All these factors minimized the actual involvement of woman contestants in the election process which is largely responsible for their unsatisfactory level of awareness. Secondly, the reservations of seats for women in the urban local government bodies under the 74th Amendment Act being more a result of political expediency than a strong move on the part of women and their organizations was also responsible for the poor show of awareness. Besides, the lack of purposive publicity in educating the women regarding the Amendment providing reservations to them added to this state of affairs which is in consonance with the dictum that less the publicity, less will be the level of awareness.

No doubt, the reservation provisions for women under the 74th Amendment Act seem to be a step in the right direction, but the regime of reservations that most women live under, within their families and communities, their load of domestic responsibilities and lack of financial autonomy make it virtually impossible for them to take part in politics even at the local level as all these factors adversely affect their urge and interest in political affairs.

CONCLUSION

Thus, to make them political aware and real partners in the real sense of the term, the existing socio-economic set-up of the Indian society needs to be restructured in such a way so as to enable women to make use of political rights and opportunities given to them under the Constitution. Women education could play a vital role in this direction as low level of literacy leaves the women low in status, dependent and powerless. Again, to make them financially strong and independent women must be given their due in property. Besides, *Mahila* (woman) Cooperatives need to be set up so as to help them in becoming financially independent. Further, if we wish to see a large number of women actually well-aware and participating in political process, it must be ensured that women organizations and associations come up in large numbers to activate the women-folk by creating in them the necessary political urge and interest as well as sense of involvement in public affairs. Last but not the least, the role of mass media can go a long way in educating and awakening women and enabling them to become real partners in the political process of the country.

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Amrita Yadava is presently working as Professor of Psychology, M.D. University, Rohtak. She is actively involved in teaching, research and extension work since more than 25 years. Her research area is Health including gender studies. More than fifty research articles have been published by her in reputed Journals and Books. She has also edited four books on different applied areas of Psychology. Professor Yadava is a person of strong conviction that women can achieve their due share only by excelling in different areas.

Sushma Sharma is working as lecturer of Psychology and Incharge Women's Cell at Sat Jinda Kalayana College Kalanaur, Rohtak. She has a teaching and research experience of about 20 years. She has published many research papers in different journals of repute and well known books. She specializes in Data Processing, Research Methods and Experimental Social Psychology. Above all she is a very revered and enlightened teacher with lot many personal qualities.

Nov Rattan Sharma is presently working as Professor of Psychology at M.D. University, Rohtak. He is a committed teacher and versatile researcher with an experience of more than 24 years. Professor Sharma has contributed around 60 research articles to various Journals and Books. He has also supervised a large number of M. Phil. and Doctoral Dissertations in addition to the extensive community level programmes on health assessment and awareness.

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